



**MEDICAL / CLINICAL PSYCHOLOGY  
GRADUATE PROGRAM**

Policies, Guidelines, and Procedures

**The University of Alabama at Birmingham**

**November 11, 2022**



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## **Program Mission and Goals**

Clinical Psychology is a specialty area of psychology that seeks to understand and ameliorate psychological and behavioral disorders. Medical Psychology is a specialty area that addresses the relationship between behavior and health. Combining these fields, the mission of the Medical / Clinical Psychology Graduate Program is to train students, using the scientist-practitioner model, to become leaders in disease prevention, risk reduction, symptom amelioration, and health promotion. To achieve this mission we specifically aim to train students who are:

1. thoroughly grounded in the science of psychology and its application to health and disease;
2. prepared to engage in high-quality practice of psychology at the entry level in collaborative and interdisciplinary professional health care contexts; and
3. prepared to conduct meaningful and high-quality research that contributes to understanding of significant psychological or medical disorders, their assessment, amelioration, or management.

Our program supports the overall mission of UAB by supporting the discovery and application of knowledge in the overlapping areas of clinical and medical psychology for the benefit of all people.

## **This Handbook**

This document serves as a resource for students and faculty in the Medical / Clinical Psychology Graduate Program. We aim to keep this document current and consistent with changing policies in our own program as well as our Department of Psychology, College of Arts and Sciences, and Graduate School. Please forward comments, corrections and suggestions for improvement to the Program Director.

Policies described in this Handbook are subject to change. Major changes are typically announced in e-mail and/or program meetings, but students are also encouraged to review the handbook from time to time, and are expected to review sections that apply to issues that are current for them. The Revision History in the appendix identifies substantive changes and indicates when they were made.

Most forms mentioned in this handbook, as well as a current copy of the handbook itself, are available on the Graduate School website (<https://www.uab.edu/graduate/students/current-students/academic-policies-progress/forms>) or the program's private (Canvas) website. Students receive access to the program's private site when they join the program. Note that web links (URLs) are provided as a convenience but they are managed outside the Program and are subject to change without notice. Please report "dead" links to the Program Director.

## **I. Program Sponsorship, Administrative Structure and Accreditation**

The Medical / Clinical Psychology Program is one of three Psychology graduate programs at UAB. As a Boulder-model scientist-practitioner training program, it represents the collaborative efforts of faculty with primary appointments in the Department of Psychology and the School of Medicine, along with psychologists in the Birmingham VA Medical Center and Children's of Alabama hospital, and in independent practice in the Birmingham community. Responsibility for program oversight is shared between the Department of Psychology and the Psychology Training Consortium (PTC), the latter being the organization of clinical psychologists in the UAB School of Medicine and associated facilities who direct the UAB/Birmingham VA Medical Center Clinical Psychology Internship Program.

The program operates within the academic policies of the Department of Psychology, the UAB Graduate School, and the College of Arts and Sciences. Policies specific to the Medical / Clinical Psychology Graduate

Program are established by the Medical Psychology Coordinating Committee (MPCC). The MPCC has primary responsibility for the program, and is made up of the Program Director, faculty representatives of the Department of Psychology and the Psychology Training Consortium, and two student representatives. Student representatives are full MPCC members with voting rights on all general program issues, but are excluded from discussions and votes pertaining to specific students and/or program personnel.

The MPCC meets as a full committee on approximately a monthly schedule at least 10 times per year. Further information on the administrative structure of the program is available from the Program Director, the Chair of the Department of Psychology or the Chair of the Psychology Training Consortium.

The program office is housed in Department of Psychology space in Campbell Hall. The program's administrative functions are supported by the Psychology Graduate Programs Manager, who also provides support for the Department of Psychology's other doctoral programs.

Since 1985 the Medical/Clinical Psychology Program has been accredited to provide training in Clinical Psychology by the Commission on Accreditation of the American Psychological Association. The Commission may be reached at 750 First Street NE, Washington DC, 20002-4242; 202-336-5979.

## **II. Mentoring and Advising**

Program faculty members are distributed widely across research and clinical settings within UAB, the UAB Health System, and affiliated health care facilities such as the VA Medical Center and Children's of Alabama Hospital. Faculty from all major training facilities and academic departments that contribute to the program work together to mentor and advise students in research and clinical domains.

Program faculty informally advise students on matters pertaining to their training through a number of roles, as instructors, clinical and research supervisors, thesis and dissertation committee members, and on an ad hoc basis as issues arise. Students are encouraged to take advantage of the broad experience and expertise represented by program faculty at all stages of their progress through the program. Orientation meetings held during the first program year are intended to help students become acquainted with the research and clinical expertise of program faculty.

Roles of specific faculty and faculty committees are described below. In addition, many past students of the program find it useful to maintain informal advisory relationships with faculty as they negotiate early stages of their post-doctoral careers.

### ***II.A. The Research Mentor***

Each student has a research mentor who directs the student's primary research activities, chairs their thesis and dissertation committees, and commits to helping the student advance toward readiness for post-doctoral training or entry-level employment as a researcher in the area of clinical / medical psychology.

Because of the unique focus and character of our program, care is taken at admissions to ensure that incoming students are an excellent fit both to the program as a whole and to the interests of individual faculty. As part of the application process, students are encouraged to identify principal areas of interest as well as a faculty mentor with whom they are interested in working on research. Once they arrive on campus, students are encouraged to finalize these arrangements so they can become involved in research at the earliest possible time.

## ***II.B. The Graduate Advisory Committee (GAC)***

Each student has an individually-tailored Graduate Advisory Committee that is responsible for advising on academic matters, clinical training and professional development. Each student's GAC consists of the research mentor and at least two additional faculty members. The GAC must include at least three doctoral-level psychologists with faculty appointments at UAB. As a group, each GAC should have sufficient familiarity with important program characteristics to adequately advise students as they progress through the program. Each GAC should also have a thorough understanding of the knowledge, skills and experience required for the student to achieve their career goals.

Each GAC has a chair, who may or may not be the research mentor. The principle responsibilities of the chair are to act on behalf of the committee in approving clinical practicum agreements/training plans throughout the year, to lead the committee in completion of its tasks in relation to the annual review of student progress, and to represent the committee to the Medical Psychology Coordinating Committee. The GAC chair also consults with other GAC members as necessary to fulfill these responsibilities effectively.

Students are encouraged to keep their GACs informed of their progress in the program, their accomplishments, and any problems that arise. The GAC seeks to play a pro-active consulting and advocacy role, which it can only fulfill when there is ongoing communication with the student. GAC meetings may be called at any time by the student, the GAC chair, the research mentor, or the Program Director.

Students play a major role in selecting their own GACs, but they must ultimately be approved and appointed by the Program Director. Also, GAC membership can change, for example based on changes in the student's areas of interest and career goals. A change to the research mentor automatically results in a change to the GAC as every student's research mentor is an *ex officio* member of their GAC. Other changes being considered should be discussed first with the Program Director.

## ***II.C. The Program Director***

The Program Director serves as an additional advisor to students. The Program Director meets individually with new graduate students upon their arrival at UAB, and thereafter as needed to assess progress and deal with difficulties as necessary. The Program Director reviews grades and clinical evaluations of all students at the end of each semester, and discusses any difficulties that arise with students and their GACs. The Program Director also approves all clinical practicum agreements/training plans. The Program Director is available for students to discuss concerns and/or celebrate their accomplishments at any time.

The Program Director serves as the initial advisor for each incoming student, meeting with each student at least once during their first month in residence and thereafter as necessary to assess the student's goals, interests, and background, assess progress, and provide general advising as needed. As the year progresses, the director and student work together to select faculty to invite to serve on the student's Graduate Advisory Committee (GAC). The Program Director arranges for orientation meetings so that first-year students can become familiar with research and clinical faculty who can serve in these roles.

## ***II.D. Program Meetings***

Program meetings are an additional venue for advising, discussion of administrative and general program matters, and learning about topics of relevance to the science, practice, and profession of clinical psychology. Currently these meetings are scheduled from 5:30 – 7:00 on the fourth Tuesday of most months. Typically there are no meetings in November, December, and May, and in April and August the meeting dates may be modified to avoid finals week or wait to include the incoming class. All students are expected to avoid making other commitments during scheduled program meeting times so that they are able to attend all of these meetings.

## **III. Curriculum**

### ***III.A. Required Courses***

Course requirements for the Ph.D. in Psychology (Medical / Clinical Concentration) are shown in Table 1. These requirements are designed to ensure that the program meets both its training goals and the expectations of its accrediting body. Consult Appendix E for information on how the curriculum maps onto the program's goals and associated objectives, knowledge domains and competencies.

The curriculum is reviewed on an ongoing basis. It is subject to change based on evolving accreditation standards, licensing requirements, internship requirements, quality improvement efforts and pragmatic considerations such as instructor availability. Students are not guaranteed that course requirements in place when they enter the program will be the only requirements they will need to satisfy in order to graduate. When changes are made the MPCC considers their applicability to students who are already in the program and an effort is made to avoid changes that would delay progress toward graduation.

### ***III.B. Required Schedule of Courses and Practica***

In order for students' educational experiences to build sequentially, certain courses and clinical practica must be taken in a particular term. Table 2 shows these requirements. Deviations from this sequence are extremely rare and require input from the GAC and the approval of the MPCC.

### ***III.C. Other Courses and Class Scheduling***

There is flexibility in the sequence with respect to most other required courses. A student might take such courses as early as the first year if they are especially relevant to the students' research, are prerequisites for other relevant coursework, or there is time in the student's schedule because required coursework has been waived based. Students are encouraged to complete all required coursework by Fall of Year 4.

Electives allow students to acquire specialized knowledge that complements their other coursework, research and clinical activities. Students are encouraged to seek advice from their research mentors, GACs, and thesis committees regarding electives they should take to strengthen knowledge and skills that are relevant to their training goals. The annual review process described later in this document is a good context for these discussions.

The Department of Psychology and the Medical/Clinical Psychology program establish the class schedule with the goal of ensuring that students can complete requirements and elective courses in a rational sequence that provides a foundation for research and clinical skills and does not delay graduation. Advance planning is critical. Consult the *Course Scheduling Plan* on the Medical/Clinical Psychology website for the most up-to-date information on course scheduling.



Table 1. Curriculum Requirements for the Medical / Clinical Doctoral Program			
Curriculum Area	Course	Title	Hours
<b>1. Basic Content Areas of Scientific Psychology (9 hours)</b>	PY 704 <sup>a</sup>	Social Psychology	3
	PY 707 <sup>a</sup>	Brain and Cognition <sup>b</sup>	3
	PY 708 <sup>a</sup>	Developmental Psychology	3
<b>2. Research Design and Quantitative Methods (15 hours)</b>	PY 716	Introduction to Statistics and Measurement	3
	PY 716L	Lab for Introduction to Statistics and Measurement	1
	PY 717 <sup>a</sup>	Applied Statistical Methods	3
	PY 717L	Lab for Applied Statistical Methods	1
	PY 719	Multivariate Statistical Methods	3
	PY 719L	Lab for Multivariate Statistical Methods	1
	<i>Either PY 718 (3 hours), or PY 700 (1 hour) plus PY 718 (2 hours):</i>		3
	PY 718	Research Design	
	PY 700	Foundations of Research Design	
	PY 718	Advanced Research Design	
<b>3. Foundations of Clinical and Medical Psychology (14 hours)</b>	PY 740 <sup>a</sup>	Adult Personality and Psychopathology	3
	PY 764	Cognitive Assessment: Child and Adult <sup>c</sup>	3
	PY 765 <sup>a</sup>	Personality Assessment	2
	PY 770 <sup>a</sup>	Survey of Psychotherapeutic Methods	3
	<i>Either PY 720 or PY 731 or PY 741:</i>		3
	PY 720	Human Neuropsychology	
	PY 731	Health Psychology	
	PY 741	Child and Adolescent Psychopathology and Treatment	
<b>4. Practice of Clinical Psychology (6 hours)</b>	PY 760 <sup>a</sup>	Interviewing and Behavioral Observation	2
	PY 769	Cognitive Behavior Therapy	3
	PY 779	Foundations of Clinical Supervision and Consultation	1
<b>5. Professional, Ethical, and Diversity Issues (5 hours)</b>	PY 619 <sup>d</sup>	Equity, Diversity, and Inclusion in Research and the Workforce	1
	PY 701	Professional Issues and Ethics in Psychology	1
	GRD 717	Principles of Scientific Integrity	3
<b>6. Clinical Practica and Internship (34 hours)</b>	PY 777	Psychotherapy Practice Shadowing	1
	PY 797	Clinical Practicum in Medical Psychology	6
	PY 790	Internship in Clinical Psychology (9 hrs in each of 3 terms)	27
<b>7. Research (18 hours)</b>	PY 699	Master's Level Thesis Research	6
	PY 799	Doctoral Dissertation Research	12

<sup>a</sup>These courses satisfy accreditation requirements in History and Systems of Psychology and/or Affective Bases of Behavior. Scores on assessments in these specific domains contribute to an aggregated grade.

<sup>b</sup>This course satisfies accreditation requirements in Advanced Integrative Knowledge of Basic Discipline-Specific Content Areas, and specifically in Biological and Cognitive Aspects of Behavior. Students who entered the program prior to 2017 may substitute PY 753 Foundations of Behavioral Neuroscience or PY 793 Cognitive Neuroscience for this requirement.

<sup>c</sup>Also provides basic graduate-level instruction in Psychometrics.

<sup>d</sup>May be listed as PY 791. Required of students who entered the program in 2018 or later.

**Table 2. Required Medical / Clinical Psychology Courses and Practica by Term for Students Entering the Program in 2021 or Later**

*Note that this table refers only to courses that are scheduled for a particular term within each student's graduate training. Other required courses listed in Table 1 are typically scheduled every year or every other year. Consult the Course Scheduling Plan on the Psychology Graduate Programs website for details. There are also research and clinical practicum enrollment requirements, which are described in the next section of this handbook.*

<b>Term</b>	<b>Course</b>	<b>Title</b>	<b>Credit Hours</b>
<b>Fall of Year 1</b>	PY 716	Introduction to Statistics	3
	PY 716L	Lab for Introduction to Statistics	1
	PY 740	Adult Personality and Psychopathology	3
	PY 764	Cognitive Assessment: Child and Adult	3
<b>Spring of Year 1</b>	PY 619	Diversity, Equity, and Inclusion in Research and the Workforce	1
	PY 717	Applied Statistical Methods	3
	PY 717L	Lab for Applied Statistical Methods	1
	PY 760	Interviewing and Behavioral Observation	2
	PY 770	Survey of Psychotherapeutic Methods	3
<b>Summer of Year 1</b>	PY 701	Professional Issues and Ethics in Psychology	1
	PY 765	Psychological Assessment: Personality	2
	PY 777	Psychotherapy Practice: Shadowing	1
	PY 769	Cognitive Behavior Therapy	3
<b>Fall of Year 2</b>	PY 719	Multivariate Statistical Methods	3
	PY 719L	Lab for Multivariate Statistical Methods	1
	PY 797	Beginning of the introductory psychotherapy practicum	1
<b>Spring of Year 2</b>	PY 718	Advanced Research Design	2
	PY 797	Continuation of the introductory psychotherapy practicum	1
<b>Summer of Year 2</b>	PY 797	Continuation of the introductory psychotherapy practicum	1
<b>Summer of Year 3</b>	PY 779	Foundations of Clinical Supervision and Consultation	1

### ***III.D. Other Required Didactic Training***

Training for submission of NSF Graduate Research Fellowship Program applications is scheduled in one session in late August or early September and is required for first-year students.

Diversity training is distributed across years, courses, clinical practica and other training experiences. One diversity training event is scheduled in Fall of Year 1 and additional diversity training is integrated into program meetings every year. Times and dates are announced well in advance and attendance is required. Conflicts or emergencies requiring absence from training should be discussed with the Program Director as soon as possible so that alternative arrangements can be made.

### **III.E. Research and Clinical Practicum Enrollment**

Research activities begin in the first semester of enrollment, and students are continuously involved in research until the doctoral dissertation is completed and accepted for publication or presentation at a scientific meeting. Clinical activities begin later but continue through the internship year. The program documents student engagement and performance in clinical and research activities through enrollment in dedicated courses and regular evaluations. Details regarding enrollment in research and clinical practicum credits appear below:

Research. Students must register for at least 1 credit hour of research during each academic term, beginning with the Spring semester of Year 1 and continuing until the student departs for internship. Course numbers depend on the student's progress with respect to master's and dissertation benchmarks, as shown in Table 3.

<b>Table 3. Research Course Enrollment Guidelines</b>	
PY 698 Premaster's Degree Graduate Research	Before admission to candidacy for the M.A.
PY 699 Master's Level Thesis Research	After admission to candidacy for the M.A., and until the degree is awarded. 6 hours are required for the degree.
PY 798 Predoctoral Degree Graduate Research	After the M.A. is awarded and before admission to candidacy for the Ph.D.
PY 799 Doctoral Dissertation Research	After admission to candidacy for the Ph.D., and until the degree is awarded. 12 hours are required for the degree.

Students admitted with a master's degree should begin with PY 798. There are multiple sections of these courses but ***students in the Medical/Clinical Doctoral Program should always register for section 00B, the section that is associated with the Program Director.*** Other sections are reserved for students in the other Psychology doctoral programs.

Additional hours of research may be taken in any term to meet minimum enrollment requirements, which are currently 9 semester hours in the Fall and Spring and 3-5 hours in the Summer. Depending on the source of the student's funding, higher minima may apply.

The research mentor serves as the supervisor for these research credits. Students and mentors are expected to keep in close contact, set reasonable timelines and goals, and work together to ensure steady progress. Progress benchmarks, described later in this document, provide an additional framework for gauging progress.

A *Research Evaluation Form* must be completed by the research mentor, signed by the student, and submitted at the end of each term beginning with Spring of Year 1. Students do not receive a passing grade in their research "course" until the required evaluation is submitted. Students engaged in research with additional faculty should discuss this activity with their GACs (including their research mentors), and may submit evaluations from these additional supervisors. All evaluations are shared with the student's GAC during the annual review, described later in this document. A student with thesis or dissertation co-chairs should request and submit separate evaluations from each chair.

Clinical Practica. Students register for PY 777 Psychotherapy Practice – Shadowing during the summer of Year 1. All other practica are covered by enrollment in PY 797 Clinical Practicum in Medical/Clinical Psychology. Aside from the introductory psychotherapy practicum listed in Table 2, there is no fixed

sequence for specific practicum experiences except that they are generally deferred until Fall of Year 2. Supervisors and GACs are charged with ensuring that each practicum builds appropriately on the student's prior coursework and clinical training.

The schedule of required clinical practica may be accelerated or waived based on review of prior clinical training records for students entering the program with a master's in clinical psychology (see section on *Respecialization and Credit for Prior Academic Accomplishments*, below).

For numerous reasons, documentation requirements are greater for clinical activities than for research. The section below on *Documentation Requirements for Clinical Practica* describes these requirements in detail. Students do not receive a passing grade in PY 777 or PY 797 until all required clinical practicum documentation is completed.

### ***III.F. Graduate School Electives***

The UAB Graduate School offers elective courses that focus on skills and tasks that are relevant to students across a variety of disciplines, such as teaching and grant-writing. Check the Graduate School website and class schedule for more information. These courses are in addition to GRD 717 Principles of Scientific Integrity, which is required.

### ***III.G. Other Specialized Training and Preparation for Lifelong Learning***

Students are occasionally required to complete additional training modules outside of regularly scheduled classes. In addition, students are expected to attend at least one thesis or dissertation proposal meeting or defense each year. Such attendance demonstrates support for fellow students and provides an opportunity to learn about studies of substantive interest as well as research- and degree-related processes more generally.

As a research-intensive university and academic health center, UAB and its associated health care facilities offer many opportunities for learning outside of regularly-scheduled classes. Students are encouraged to develop habits of lifelong learning while in graduate school by attending and participating in colloquia, case conferences, journal clubs, workshops, and intensive courses as such opportunities arise.

Finally, to keep abreast of developments in their field, students are strongly encouraged to join and actively participate in those local, national and international professional and scientific organizations that are most relevant to their interests.

## **IV. Clinical Training Requirements and Expectations**

### ***IV.A. Foundational Experiences***

Clinical training in the Medical / Clinical Psychology Graduate Program involves a sequence of coursework and practicum experiences that are intended to develop knowledge and competency required for the clinical internship and, ultimately, for the practice of clinical psychology at the entry level in a variety of settings. Training begins with required courses in Year 1 (See Table 2). Structured hands-on preparation for clinical practica begins with PY 760 Interviewing and Behavioral Observation and PY 777 Psychotherapy Shadowing in the Summer of Year 1 (see Table 1) and clinical practica that begin in Year 2.

#### ***IV.B. Assessment and Intervention Training Sequences***

Theoretical and practical foundations for assessment are established in courses that students complete in Year 1. PY 760 (Interviewing and Behavioral Observation), PY 764 (Psychological Assessment: Cognitive Child and Adult), and PY 765 (Psychological Assessment: Personality) provide training in multiple aspects of clinical assessment, as well as initial experience with patients/clients. Students may begin to enroll in PY 797 Clinical Practicum for closely-supervised experience in cognitive, personality, and psychopathology assessment beginning in the Fall semester of Year 2.

Intervention practicum training is structured to provide all students with an introductory intervention practicum sequence that builds on the assessment and intervention course sequence and is supplemented by advanced practica that encourage students to acquire greater skills in particular areas of interest. Intervention practicum begins in the Summer semester of Year 1 with PY 777 (Psychotherapy Practice - Shadowing), which provides an initial clinical placement for students to gain exposure to core elements of clinical assessment and intervention, but in which they are not individually responsible for implementing those elements.<sup>1</sup>

During Year 2, students complete their introductory psychotherapy practicum in the Spring and Summer terms. Students acquire initial experience with general psychopathology and provide ongoing intervention for individuals who present with psychological distress (e.g., depressive, anxiety, and personality disorders and related diagnostic categories).

Students begin to enroll in PY 797 for advanced intervention experience beginning in the Fall of Year 3. The purposes of advanced practica are to broaden the students' clinical experience and to provide greater depth of experience in their areas of specialization. Students obtain more specialized intervention experience (e.g. with specific population groups or in specific settings) or further experience with ongoing intervention for general psychological complaints in a setting other than that in which they completed the initial psychotherapy practicum requirements. Advanced training experiences assume a solid foundation in basic clinical skills.

It is recognized that at each level intervention training needs to be integrated with foundational knowledge and training in assessment and research. The goal of this integration is to ensure that students learn to evaluate the intervention procedures they are using, both against relevant empirical findings and with respect to their efficacy in meeting treatment goals for particular clients.

Students acquire knowledge about supervision and interprofessional consultation PY 779 Foundations of Clinical Supervision and Consultation, typically completed in Year 3. Following this course advanced students may serve as supervisors for those whose knowledge and skills are less developed in the clinical

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<sup>1</sup> Students are very occasionally permitted to engage in supervised assessment and intervention activities prior to the points in the program at which these are prescribed. For example, as early as the first semester of Year 1 students may provide highly-structured assessments and interventions as part of their involvement in clinical research. Students who enter the program with a master's degree in clinical psychology and associated clinical practicum experiences may seek to waive PY 777 Clinical Shadowing and be ready to undertake clinical practica at UAB (PY 797) in their first year. Other exceptions may be approved by the Program Director if the student has completed the relevant graduate-level assessment and/or intervention coursework and is making recommended progress on research. Approval in such cases also requires discussion between the Program Director and the supervisor to ensure that the supervisor is cognizant of the student's level of training and preparation and that the activity will be maintained within boundaries that are consistent with that background. All such exceptions are documented in the student's file and discussed with the faculty members of the MPCC.

domains in which the supervision is taking places. Student acquire experience in interprofessional consultation on an ongoing basis in the range of interdisciplinary settings in which they train.

A complete list of training goals, objectives and domains of knowledge and competency that the program aims to instill, including those related to clinical practice, is available in Appendix E and posted on the program's public website.

#### ***IV.C. Distribution and Diversity Requirements***

Students are required to gain breadth of assessment and intervention experience. Clinical practicum experiences should be distributed across inpatient, outpatient, mental health / substance abuse and medical care environments. Intervention experience in a medical patient care environment is not required. However, because the logistics of patient management, the context of treatment, and the clinical perspective of health care providers can vary dramatically between medical and mental health / substance abuse care environments, experience in both types of settings is strongly recommended. Each student should have at least one structured training experience with patients who are presenting for the management of a medical condition for which psychological intervention is a significant component of comprehensive treatment.

Students are also expected, over the course of their practicum training, to acquire experience providing clinical services to patient populations that are diverse on a number of dimensions, including but not limited to age, race/ethnicity, sexual orientation, gender identity, and presence of physical disability. Students and their GACs track the diversity of clinical experiences as the student progresses through the program. Clinical supervisors augment these experiences with relevant readings, review of group-specific norms and epidemiological data, and discussion of diversity issues in supervision.

#### ***IV.D. Clinical Supervision Standards***

Each clinical practicum has one program-approved primary supervisor who is responsible for the quality of the student's practicum training and experience, as well as for the clinical care of patients/clients who receive services from the student. In the multi-professional / inter-professional settings in which many of our practica occur, students may receive feedback from other professionals, trainees and technicians. However, the oversight and gate-keeping roles of the primary supervisor are not altered by the involvement of these other individuals. Moreover, only the primary supervisor can sign clinical practicum agreements and evaluations, and verify hours.

Approved primary clinical supervisors are generally licensed psychologists who are vetted through their membership in the Psychology Training Consortium. Exceptions for other licensed psychologists and other mental health professionals are approved through the Medical/Clinical Psychology Coordinating Committee. Students should contact the Program Director if they are interested in completing a practicum with a supervisor who is not on the list of approved supervisors, which is implemented through the program's practicum tracking software.

Supervision may be provided on an individual or group basis, or a combination of the two. For the introductory intervention practica, students must receive at least 30 minutes of face-to-face supervision per hour of direct patient contact. For other practica, at least 15 minutes of face-to-face supervision must be provided per hour of patient contact. These minimum supervision ratios are unlikely to be adequate for all patients and students, and development of both general and specialized clinical competencies at a level that is expected on internship will require that most students receive more intense supervision in some settings. The MPCC has established the goal that all students will have received at least 20 minutes of supervision per hour of patient contact across all practicum experiences by the time they apply for internship.

When group supervision is provided, the amount of time spent in review of individual cases should vary as a function of patient and student characteristics. A brief review should be presented by the student after each clinical contact in order to maintain a minimum level of supervision, and a thorough review of each case should be undertaken after every 4-5 clinical contacts.

Regardless of the supervision format, an individual supervision meeting should occur at the beginning of the practicum, before any direct clinical services are undertaken, to facilitate clear communication regarding training goals, diversity- and distribution-related opportunities at the training site, and supervision format and schedule. The *Clinical Practicum Agreement and Training Plan Form* should be reviewed and completed at this meeting.

At the end of each term an individual meeting should also occur so that the supervisor can provide feedback on progress achieved and strengths and weaknesses observed. The *Clinical Practicum Evaluation Form* provides a framework for this discussion.

All clinical practica must involve direct observation of the student's clinical performance by the primary supervisor at least once during each term, prior to completing the evaluation. Such observation must enable the supervisor to both hear the student as they provides intervention and/or assessment services to actual patients/clients (e.g., through a 1-way mirror, real-time audio or audio/video monitoring, review of audio or audio/video recordings, or presence during assessments or therapy). Plans for required observation of the student by the supervisor should be described in the practicum agreement. Some settings may require students to record themselves during a session, and in such cases handling of these recordings requires special care to ensure compliance with both HIPAA and site requirements.

#### ***IV.E. Documentation Requirements for Clinical Practica***

For multiple reasons, clinical practicum experiences must be documented carefully. First, the program needs to track student participation in patient care for risk management purposes. Secondly, students ultimately request that the Program Director verify the hours that they report on their internship applications, and documentation is required as a basis for that verification. Third, for internship application purposes clinical practica must be approved by the Program Director and must include a meaningful evaluative component. Finally, licensing boards are increasingly requiring specific documentation of clinical training experiences. To address these issues, each clinical practicum experience must be preceded by submission of a signed agreement and training plan, documented with logged hours and activities that are verified by the primary supervisor, and evaluated in writing by the supervisor at the end of each academic term (i.e., approximately every 4 months for ongoing practicum experiences). Students are provided with software (PractiTrack©) that generates the required forms and facilitates tracking of clinical activities and data entry into the internship application.

Therefore, in order for students to be able to count clinical practicum hours on the internship application, the following must be true:

1. *A Clinical Practicum Agreement and Training Plan*, signed by the student, supervisor, and GAC chair, must be submitted to the Program Director. Students may not accrue practicum hours toward the internship application at a clinical site unless and until this form has been submitted.
  - a. For PY 777 Psychotherapy Practice – Shadowing, the student must should identify a clinical psychologist whom they would like to shadow and discuss those plans with the GAC chair (or full GAC) and Program Director prior to mid-May of the first year. The agreement form should be signed and filed with the Director by June 1<sup>st</sup>. By mutual agreement with the supervisors and Program Director, students may split their shadowing experience across two settings if necessary to obtain exposure to both intervention and assessment. In such cases an agreement should be submitted with each supervisor. The standard time commitment for shadowing is approximately 40 hours distributed across the 10-week Summer term (i.e., ~4 hours/week). Progression from shadowing to providing clinical services in PY 777 is at the discretion of the supervisor.
  - b. For PY 797, which covers all other practicum experiences prior to the internship, the agreement must be submitted before clinical services begin, regardless of the timing of such services relative to the academic calendar. Agreements may be written to cover a term of up to one year, after which a new agreement must be submitted for the practicum to continue. Students should alert the Program Director if an experience will be terminated substantially before the ending date that was specified on the submitted form.
  - c. Clinical agreements/training plans are required for students on assistantships or traineeships that include provision of clinical services and accrual of hours toward the internship application.
2. Students must track clinical hours and other clinical activities (tests administered, reports written) and have those activities verified by their primary supervisors. All students use the same software to ensure that consistent information on practicum experiences is available to students and their GACs, and that data can be combined across students for program-level monitoring, planning, and quality improvement purposes. Students are encouraged to update their hours no less frequently than once/week and to submit updated records to the program office at least once/month.
3. At the end of each academic term a *Practicum Verification and Evaluation* form must be completed by every supervisor for each student whom they have supervised during the term. Activities to be verified are listed on the form.

At the end of each term practicum grades are submitted once all practicum verifications / evaluations are received and updated activity logs are uploaded. Students are also encouraged to use the Validity Checks tool to show all unverified activities as well as other issues that may need to be addressed, and to request an AAPI Preview to assess progress accruing hours and experience in various categories. It may be helpful to review the AAPI Preview with the GAC chair so that any concerns or issues can e addressed promptly.

#### ***IV.F. The Clinical Internship***

A one-year clinical internship is required. The internship must be accredited by the Commission on Accreditation of the American Psychological Association or the comparable accrediting division of the Canadian Psychology Association. A waiver of the accreditation requirement may occasionally be allowed, but only with prior approval of the MPCC. In considering such waivers, the student and MPCC should consider the fact that state licensing boards may require an accredited internship, or in the absence of a firm



requirement may investigate and evaluate all details of an applicant's credentials much more closely when their internship was not accredited at the time that it was completed.

Beginning with the 2022-2023 internship application cycle (for internships beginning in 2023) students may apply to the UAB and/or Birmingham VAMC internships. Through this policy change we aim to provide greater flexibility for students and ultimately help to address our state's considerable shortfall of mental health service providers. For most students, however, an internship away from Birmingham will be preferred. One of the most important values of internship training is exposure to new supervisors, training opportunities, and systems of clinical care. In contrast, internship training in Birmingham risks redundancy with prior practicum training given that our practicum sites overlap extensively with rotations and supervisors available in local internships, and activities of interns and pre-internship graduate students at these sites are often indistinguishable. For this reason, consultation between the student and their GAC is required for students to apply to a local (Birmingham) internship. This consultation is documented on the *GAC Review Form for Students Applying to Birmingham Internships*, which is available on Canvas.

## **V. Degree Requirements and Associated Procedures**

### ***V.A. General Considerations***

Medical/Clinical Psychology is a doctoral program. Students are admitted based on the expectation that they will complete all requirements leading to the Ph.D. Although UAB does not offer a master's *program* in Psychology, all Medical / Clinical Psychology students complete a master's *thesis* and are awarded the M.A. as part of their progress through the doctoral program. Formal steps for completion of the master's thesis and doctoral dissertation are summarized below.

Students are responsible for reviewing and following the steps described below and in the *Graduate Catalog* (<http://catalog.uab.edu/graduate/>; <http://catalog.uab.edu/graduate/completionofadegree/>). Students should also be aware of and meet Graduate School deadlines for submission of required forms and completion of associated steps, and allow time for processing of forms in the Psychology Graduate Programs Office. Most forms are available from the Graduate School's *YOUR THESIS AND DISSERTATION* page (<https://www.uab.edu/graduate/students/current-students/theses-dissertations/your-thesis-and-dissertation>) or their *FORMS* page (<https://www.uab.edu/graduate/students/current-students/academic-policies-progress/forms>). If a reference to a Graduate School form appears below, it will likely be available on one or both of these pages. Consult with the Graduate Programs Manager and Program Director if questions arise.

All of the usual forms required by the Graduate School are now electronic, and are routed for signatures using Adobe Sign. When you initiate any form, when given the opportunity include e-mail addresses for both the Program Manager and the Program Director (i.e., [trobe@uab.edu](mailto:trobe@uab.edu) and [ecook@uab.edu](mailto:ecook@uab.edu)). This assists us with record-keeping and increases our ability to catch any errors.

## ***V.B. Steps for Completion of the Master's and Doctoral Degrees***

The steps given below are roughly sequential, but in most cases it is efficient to complete Steps 2-4 (appointment of the committee, preparation of the written proposal, and verification of IRB/IACUC compliance) in parallel. The first two of these steps are required before the proposal can be defended and all three are required for admission to candidacy for the degree. Students are discouraged from beginning their research (other than pilot/feasibility investigations) without full committee approval, and research ethics compliance is required for the thesis, dissertation, and all other research projects before data collection or analysis of pre-existing datasets begins.

1. *Selection of the Research Mentor.* In consultation with the Program Director, each student identifies a research mentor who will chair the thesis and/or dissertation committee. Typically this selection is mutual and begins during the admissions process. While continuity in mentorship across one's course of graduate study has advantages, a change in mentor between the thesis and dissertation may be a better choice in some cases based on changes in the student's research focus, or it may be necessitated based on changes in faculty availability. At both the master's and doctoral levels the research mentor / committee chair should be a doctoral-level psychologist who is an active and productive researcher with Level II Graduate Faculty status (see below) and available time to supervise the student's research. The Program Director approves recruiting mentors and committee chairs according to these criteria. Exceptions (e.g., for a doctoral-level mentor from another discipline) must be approved by the faculty members of the MPCC.
2. *Appointment of Additional Committee Members.* The student and research mentor confer to develop a general research plan (including study population, hypotheses, and methods including analytic strategy) and identify additional faculty members to complete the committee. These additional committee members should provide expertise that complements that of the chair. Formal requirements for the committee as a whole (including the chair) are:
  - a. The majority of the committee must hold doctoral-level degrees in Psychology.
  - b. Master's Committees include at least three members. At least one member must hold a primary appointment in the Department of Psychology and at least one must have a primary affiliation outside Psychology or with another graduate program within Psychology.
  - c. Dissertation Committees include at least five members. At least two members must hold primary appointments in the Department of Psychology and at least two must have primary affiliations outside Psychology or with another graduate program within Psychology.
  - d. The committee chair, or one of two co-chairs, must be a UAB faculty member with Level II Graduate Faculty Status. All committee members must hold Level I or Level II Graduate Faculty Status, or Ad Hoc Graduate Faculty Membership. See <https://www.uab.edu/graduate/faculty-staff/graduate-faculty/definitions> for definitions of these categories and <https://www.uab.edu/graduate/faculty-staff/graduate-faculty/graduate-faculty-listing> for a list of UAB faculty who currently hold Graduate Faculty Status. Note also:
    - i. Most committee members hold Level I or (more typically) Level II Graduate Faculty Status as an extension of their UAB faculty appointments.
    - ii. Occasionally best choices for the committee include individuals who are not UAB faculty but have appropriate expertise. Ad Hoc Graduate Faculty Membership can be arranged for these individuals (see below).

When a tentative committee roster has been identified, a brief summary of the research plan and the proposed committee membership is submitted to the Program Director, who approves the roster or suggests changes. After the research mentor, student and Program Director agree on the committee, the student solicits the participation of the additional members. Invited faculty who decline to serve are replaced based on further consultation with the mentor and Program Director.

Once committee membership is settled, outstanding Graduate Faculty Status issues should be resolved. Any proposed committee members who are on the UAB faculty but do not hold Graduate Faculty Status should be asked to apply for Level I or Level II status through their primary department. For proposed committee members who are *not* on UAB faculty, the program requests Ad Hoc Graduate Faculty Membership. To facilitate this process the student or mentor provides the Program Director and Program Manager with a brief paragraph that makes the case for inclusion of this member. This memo should describe

- a. The project in general, including aspects of the project that are especially relevant to the ad hoc member's expertise.
- b. The proposed ad hoc member's expertise and experience that are related to the project, and how they are related.
- c. Any other connections to the planned research, such as a collaborative or consultative connection between the student or mentor and the ad hoc member.

In addition to this memo, the student or mentor also forwards a copy of the ad hoc member's CV and the individual's birth month and day (not year). The Program Director and Program Manager work together to assemble the required materials and forms to request Ad Hoc Graduate Faculty Membership and forwards them to the Graduate Dean or their representative.

Once it is established that all committee members have Graduate Faculty Status or Ad Hoc Membership, the student initiates a Committee Form online (see the Graduate School website pages cited in Section V.A., above), including e-mail addresses for both the Program Director and the Program Manager. The Graduate Dean issues final approval or may request changes.

3. *Documentation of IRB/IACUC Compliance.* The student and their mentor must secure any required research ethics approval for the project. Compliance with this requirement must be documented before the student can be admitted to candidacy for the degree. The instructions that accompany the Admission to Candidacy and Research Compliance Verification forms provide brief indication of how compliance should be documented. In general, *compliance should be documented by an official IRB approval form or approved amendment on which the student's name appears,*<sup>2</sup> as described below:
  - a) *If the project is sponsored externally in the student's name, or if no prior protocol covering the planned research has been submitted,* then the student should submit a protocol specifically for the project. Scientific review at the department level is required; consult the Department of Psychology website for the appropriate forms. The student should be listed as Co-PI with the research mentor.
  - b) *If there is already IRB approval in place for a broader project that includes, or can reasonably be amended to include, the thesis or dissertation research, then the student may be added to the project as Co-PI. An IRB Personnel eForm (<https://www.uab.edu/research/home/irb-announcements/irb-personnel-eform-guidance-materials-and-updates>) is used for this purpose. Check with the IRB to obtain an approval form that can be submitted to the Graduate School.*
  - c) *If the student is listed as a research assistant on an original protocol then the student is in compliance with IRB requirements but there is no documentation of approval that includes the student's name. Again in this case: Check with the IRB to obtain an approval form that can be submitted to the Graduate School.*

*Students are encouraged to submit IRB paperwork at the earliest possible time to ensure that admission to candidacy and the project itself are not held up while awaiting IRB approval. New protocols in particular should be submitted as soon as general procedures are determined. An amendment that makes minor*

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<sup>2</sup> It is not sufficient to submit an approval letter for the project that does not include the student's name plus a copy of materials that the student or PI submitted to the IRB. Rather, the document with the student's name must *originate from or be signed or stamped as approved by* the IRB.

changes based on committee feedback will typically be approved much more quickly than a new protocol.

*Students must maintain compliance with IRB requirements throughout the conduct of their research, through final data analysis and submission for publication, by timely submission of Investigator's Progress Reports and amendments if study procedures change or the sample size is increased. Students who are not sole PIs on their own projects should work with their mentor(s) / Co-PIs to ensure that these requirements are met.*

4. *Preparation of the Written Proposal.* Under the research mentor's supervision, the student prepares a written proposal that includes a statement of the specific aims, questions, and/or hypotheses to be addressed, a review of the relevant background literature, and a description of the methods to be used to conduct the study and analyze the data. This proposal should be prepared in APA style or, with the committee's permission, in the form of a grant application.

Regardless of format, the written proposal must include a timeline for completion of each major phase of the project and address the feasibility of the project in terms of recruitment of participants, availability of resources, and any other issues relevant to timely completion of the project.

5. *Defense of the Proposal.* After the committee is appointed and the proposal is completed to the satisfaction of the research mentor, the student schedules a meeting to defend their proposal to the additional members of the committee. At least 90 minutes should be allotted for this meeting, and it should be scheduled such that all members can attend for the entire time. At least two weeks in advance of this meeting the Program Director and Program Manager must be informed of its date, time, and location, as well as the working title.

Proposal meetings are open to all interested parties although broad advertisement is not required. The student presents the background and research plan and the committee poses questions. *In addition to questions focused on the proposal, the committee should additionally ask more comprehensive questions to assess whether the student's knowledge of their field of study is appropriate for the degree that the student is seeking.* At the end of the proposal meeting the committee meets in closed session to determine whether the proposed research and the associated document are ready for approval, and whether the student should undertake any further study or seek other training or consultation prior to completion of the degree.

If the committee requests changes to the research plan then the student should create, under the supervision of the research mentor, a written summary of any decisions that were made. The committee may also or alternatively request changes to the proposal document. Any such written summary or revised proposal should be submitted to the full committee for verification as soon as possible after the proposal meeting.

When the committee is satisfied with the proposal, any revised research plans, as well as the student's level of preparation or plans to address any areas of deficiency, then the student is approved by the committee to apply to the Graduate School for admission to master's or doctoral candidacy.

The format of the final thesis or dissertation should also be discussed with the committee. With the committee's permission the student may write the thesis or dissertation in the form of journal article reprints and/or preprints, the latter including manuscripts in preparation for submission to a named journal. Guidelines for both the conventional format and the reprint/preprint format are provided in the *UAB Format Manual for Theses and Dissertations*. The program specifies no greater requirements for the reprint/preprint option beyond those described in the *Format Manual*.

6. *Admission to Candidacy and Registration for Research Hours.* As soon as possible after the proposal is approved, the student initiates an Application for Admission to Candidacy for the degree being sought (Master's Plan 1 or Doctor of Philosophy). See the Graduate School website pages cited in Section V.A., above, and include both the Program Manager and the Program Director when initiating this form. Evidence of IRB/IACUC approval must be attached.

Once all signatures and approvals have been obtained the student is e-mailed copy of the final signed form, indicating that they are admitted to candidacy, are approved to begin their thesis or dissertation research, and are eligible to register for master's or dissertation research hours (PY 699 or PY 799, respectively). Six hours of PY699 are required for the master's degree and 12 hours of PY 799 are required for the doctorate. Visit the Graduate School's *YOUR THESIS AND DISSERTATION* page to find their deadlines for admission to candidacy before a student can register for these hours. Master's candidates confer with the Program Director regarding scheduling of these hours alongside required and elective courses. Doctoral candidates complete the 12-hour enrollment requirement for PY 799 no later than the fall and spring semesters prior to departure for internship. Students may enroll for additional hours of PY 799 during the summer in which they depart for internship, even if the dissertation has already been defended, assuming that they are continuing to work on related research.

7. *Completion of the Research.* The student completes the thesis or dissertation research and the corresponding document under the supervision of the research mentor. The student and mentor consult with other committee members as necessary at any stage in this process. The committee *must* be consulted to approve any substantial changes to methods, including sample size. Such consultation may be by individual meetings with members or e-mail, with the option for any member or the student to request an interim committee meeting to discuss proposed changes before they are approved. Students are strongly encouraged to document in writing any committee decisions regarding changes to the approved research plan, and to submit such documentation to the full committee.
8. *Submission of the Application for Degree (AFD).* As the student nears completion of the thesis or dissertation, they should check the relevant Graduate School deadlines at <https://www.uab.edu/graduate/students/current-students/completing-your-degree/earning-your-degree>. Degrees are awarded on a specified date at the end of each term, and each graduation date has associated deadlines for submission of the AFD, for the date of the final defense, and for submission of the final document to the Graduate School. Submit the form through BlazerNET by clicking on Links/Forms and selecting Apply for Graduate Degree/Certificate. Note that the AFD commits the student, research mentor and committee to meet the deadlines associated with the specified degree date, and failing to meet those deadlines requires the student to submit a new AFD. The AFD fee (\$60) is not covered by the tuition scholarship.

In completing the master's degree, the student should discuss the timeline for completion of the thesis with the research mentor and select the graduation month based on their anticipated ability to meet the corresponding Graduate School deadlines. An additional consideration is committee member availability. Finally, although the student may hold their thesis defense before enrolling in all 6 required hours of PY 699, the timeline for completing these hours will affect the graduation term. Consult with the Program Director if there are questions about this issue.

Most considerations for completion of the doctorate are the same as for the thesis, but an important difference is that the degree will not be awarded until the student also completes their pre-doctoral internship. Nevertheless, the AFD must be submitted to the Graduate School before the dissertation defense can be scheduled. Consult Appendix D for more detailed information related to the internship and graduation.

9. *Planning and Preparation for the Thesis or Dissertation Defense.* As the thesis or dissertation nears completion, committee members should be consulted regarding their availability around the projected thesis defense date and the amount of lead time they each require to review the completed document. The defense should be scheduled for a date and time when all members can attend in person unless a committee member is permanently located far from Birmingham, in which case they can attend via Zoom. At least 90 minutes should be scheduled for a thesis defense and 2 hours for a dissertation defense. *The defense may be scheduled only after the research mentor approves the thesis or dissertation.*

Avoid scheduling defense meetings immediately prior to the Graduate School deadline for graduation in a particular term, or immediately prior to periods of extended unavailability of the student or committee members, as the research mentor or full committee may need to be available to review final edits. In addition, defenses should not be scheduled during MPCC meetings (typically 10:00 – noon on the third Friday of each month) so that the Program Director and other members can attend in fulfillment of their program oversight roles.

Thesis and dissertation defenses are open to the public. The student must provide the date and time for the defense along with the final document title to the Program Manager and Program Director *at least three weeks prior to the scheduled date* so it can be adequately publicized. All defenses are held in Room 327 of Campbell Hall or another meeting room in Campbell Hall or the Medical Center that is approved by the Program Director. Defenses should be held in hybrid in-person/Zoom format to facilitate attendance, or may be held exclusively on Zoom if the student is away from Birmingham on internship. Therefore, always provide a Zoom link when you inform program leadership of your dissertation defense plans.

The student should send a copy of the completed thesis or dissertation to the full committee at least two weeks ahead of the defense unless all members have agreed to a shorter review time.

*At least two weeks prior to the defense (and sooner if possible)* the student must submit a Thesis/Dissertation Approval Request Form to the Graduate School (see the Graduate School website pages cited in Section V.A., above). The Graduate School sends the student a confirmation e-mail when the request has been processed, and the Certificate of Approval for Electronic Theses and Dissertations is sent to all members of the committee on the day of the scheduled defense.

10. *The Defense Meeting and the Final Document.* The *UAB Format Manual for Theses and Dissertations* contain extensive information on the required format of the thesis and dissertation, as well as the format for the defense meeting and procedures for committee review, approval, and dissent from approval. In general, theses and dissertations should be formatted in APA style.

At the public defense meeting, the student presents the background, methods, results and conclusions, after which all attendees – both committee members and others in attendance – are given adequate time to ask questions. It is recommended that presentations be limited to 40-45 minutes to allow sufficient time for some questions from within the first hour of the meeting. Public attendees are generally given an opportunity to ask their questions first, though ideally they also have an opportunity to hear questions from the committee as time allows. The defense represents a training opportunity for other graduate students, so the entire question-and-answer period should remain open to the public unless there is some strong rationale for a part of it to be restricted to the student and the committee. (An example might be detail-oriented questions about the document that would be meaningless to those who hadn't had an opportunity to review it.) The committee may also ask questions about the thesis or dissertation document or about the student's comprehensive knowledge of the field, for example following up on issues regarding the student's general level of preparation and knowledge that were raised at the proposal meeting.



After the public defense is completed, members of the public and (typically) the student are dismissed so that the committee can meet in closed session to decide whether the project and document are acceptable and the student should be recommended for the degree. The student then re-joins the committee and is informed of the results of the committee's deliberations. If deficiencies are identified, the committee decides on specific steps that the student must complete before the document can be accepted and the student can be recommended for the degree.

The committee should also agree on a plan for signing the approval form. According to the Graduate School: *"Signatures of committee members and program directors ... indicate their assurance that they have examined the document and have found that it is of professional quality from all standpoints, including writing quality, technical correctness, and professional competency, and that the document conforms to acceptable standards of scholarly presentation."* Committee members may withhold their signatures until all issues have been addressed to their satisfaction, or they may delegate that responsibility to the Chair.

11. *Final Submissions.* After making all required changes, the student submits an electronic copy of the final accepted version of the document in PDF form to the entire committee, copying the Program Director. The Program Director verifies with the committee Chair that this final document reflects all changes required by the committee and then archives it as required for accreditation and signs the form.
12. The student electronically submits the approved and accepted thesis or dissertation to the Graduate School, following instructions on the Graduate School *YOUR THESIS AND DISSERTATION* page (<https://www.uab.edu/graduate/students/current-students/theses-dissertations/your-thesis-and-dissertation>).

## **VI. Progress through the Program**

The Program seeks to ensure that all students learn and work in environments that allow them to make steady progress toward completion of program requirements and preparation for internship, graduation and entry-level employment or a post-doctoral fellowship. Progress benchmarks and policies provide students and faculty with consistent guidance regarding program expectations. Graduate Student Committees, research mentors, and the Program Director serve as resources to help students maintain steady progress on an ongoing basis. Along with the MPCC these committees and individuals also evaluate student progress and performance, and implement related program policies.

### **VI.A. Progress Benchmarks**

The Program designates student progress using the following categories:

- *Recommended or Outstanding Progress* is consistent with application for internship in Year 5, optimal preparation to apply for post-docs and/or post-internship employment during the internship year, and graduation at the end of Year 6.
- *Good Progress* is also consistent with application for internship in Year 5 and graduation at the end of Year 6, but suboptimal as preparation for applying for post-docs and other employment during the internship year.
- *Adequate Progress* refers to the rate of progress that is consistent with application for internship in Year 6 and graduation at the end of Year 7.

- *Inadequate Progress* represents a failure to meet benchmarks for Adequate Progress. There are concerns about whether all program requirements will be completed in time for graduation by the end of Year 7.

Tables 4a and 4b articulate benchmarks for Recommended / Outstanding, Good, and Adequate progress for students entering the program after completion of a bachelor's or master's degree, respectively. Students entering with a master's degree are expected to complete the program at a pace that is accelerated by about one year.

In general these benchmarks and progress designations are intended as *self-monitoring, advising, and program evaluation tools*. Faculty as well as students play a role in ensuring that students make steady progress. Evaluations of student progress, such as those conducted annually by the GAC and MPCC and described elsewhere in this handbook, should consider the totality of each student's activities and circumstances. Speed of progress through the thesis and dissertation is not the most important issue in a student's training and a student may make slower progress than the benchmarks suggest for good reasons that ultimately enrich the quality of their training. However, when formal progress designations are adjusted relative to the published benchmarks, specific reasons should be noted.

*How to use the tables:*

1. Choose Table 4a or 4b depending on whether your master's thesis requirement was waived.
2. Scan down the table rows until you find the current term or a relevant date.
3. Scan across the cells in the row until you find a cell that lists tasks you have completed (or will complete by the end of the selected term or the selected date) along with all tasks in cells above it in the same column. The heading of that column is your progress designation.

Note that the PractiTrack computer program provides a tool for progress designations that can be used as an alternative to reading this table.

<b>Table 4a. Progress Benchmarks for Students Entering the Program with a Bachelor's Degree</b>			
<b>Year: Term/Date</b>	<b>Tasks Completed by This Term for:</b>		
	<b>Recommended Progress</b>	<b>Good Progress</b>	<b>Adequate Progress</b>
<b>1: Fall</b>	<u><b>Master's</b></u> Mentor and topic identified	<u><b>Master's</b></u> Mentor identified	<u><b>Master's</b></u> 1-2 possible mentors identified
<b>1: Spring</b>	Committee appointed; IRB materials submitted	Topic identified	Mentor identified
<b>1: Summer</b>	Proposal approved; IRB compliance documented; admitted to candidacy	Committee appointed; IRB materials submitted	Topic identified
<b>2: Fall</b>	Data collection started	Proposal approved; IRB compliance documented; admitted to candidacy	Committee appointed; IRB materials submitted
<b>2: Spring</b>	Data collection completed	Data collection started	Proposal approved; IRB compliance documented; admitted to candidacy;
<b>2: Summer</b>	Thesis defended		Data collection started



<b>3: Fall</b>	Submitted for publication or presentation	Data collection completed	
<b>3: Spring</b>	<b><u>Dissertation</u></b> Mentor and topic identified	Thesis defended	
<b>3: Summer</b>	Committee appointed; IRB materials submitted	Submitted for publication or presentation	Data collection completed
<b>4: Fall</b>	Proposal approved; IRB compliance documented; admitted to candidacy	<b><u>Dissertation</u></b> Mentor and topic identified	Thesis defended
<b>4: Spring</b>	Data collection started; <i>Required courses completed*</i>	Committee appointed; IRB materials submitted; <i>Required courses completed*</i>	Submitted for publication or presentation
<b>4: May 15<sup>th</sup></b>		Proposal approved	
<b>4: June 15<sup>th</sup></b>		IRB compliance documented; admitted to candidacy	
<b>4: Summer</b>	<i>At least one 1<sup>st</sup>- or 2<sup>nd</sup>-author paper submitted; data collection completed</i>	Data collection started; <i>at least one 1<sup>st</sup>- or 2<sup>nd</sup>-author paper submitted</i>	<b><u>Dissertation</u></b> Mentor identified
<b>5: Fall</b>	Dissertation defended; <i>Internship applications submitted</i>	Data collection completed; <i>Internship applications submitted</i>	Topic identified; <i>Required courses completed*</i>
<b>5: Spring</b>	Submitted for publication or presentation; <i>Internship secured</i>	Dissertation defended; <i>Internship secured</i>	Committee appointed; IRB materials submitted;
<b>5: May 15<sup>th</sup></b>			Proposal approved
<b>5: June 15<sup>th</sup></b>			IRB compliance documented; admitted to candidacy
<b>5: Summer</b>	<i>Internship</i>	Submitted for publication or presentation; <i>Internship</i>	Data collection started; at least one 1 <sup>st</sup> - or 2 <sup>nd</sup> -author paper submitted for publication
<b>6: Fall</b>	<i>Internship</i>	<i>Internship</i>	<i>Internship applications</i>
<b>6: Spring</b>	<i>Internship</i>	<i>Internship</i>	Data collection completed; <i>Internship secured</i>
<b>6: Summer</b>	<i>Internship completed; Ph.D. awarded</i>	<i>Internship completed; Ph.D. awarded</i>	<i>Internship begins</i>
<b>7: Fall/Spring</b>			Dissertation defended; submitted for publication or presentation; <i>Internship</i>
<b>7: Summer</b>			<i>Internship completed; Ph.D. awarded</i>

Table 4b. Progress Benchmarks for Students for whom the Master's Thesis Requirement was Waived			
Year: Term/Date	Tasks Completed by This Term for:		
	Recommended Progress	Good Progress	Adequate Progress
<b>1: Fall</b>	<b><u>Dissertation</u></b> 1-2 possible mentors identified	<b><u>Dissertation</u></b> 1-2 possible mentors identified	<b><u>Dissertation</u></b> 1-2 possible mentors identified
<b>1: Spring</b>	Mentor identified	Mentor identified	
<b>1: Summer</b>			
<b>2: Fall</b>			Mentor identified
<b>2: Spring</b>	Topic identified		
<b>2: Summer</b>	Committee appointed; IRB materials submitted		
<b>3: Fall</b>	Proposal approved; IRB compliance documented; admitted to candidacy;	Topic identified; Committee appointed	
<b>3: Spring</b>	data collection started; <i>required courses completed*</i>	IRB materials submitted; <i>required courses completed*</i>	Topic identified
<b>3: May 15<sup>th</sup></b>		Proposal approved	
<b>3: June 15<sup>th</sup></b>		IRB compliance documented; admitted to candidacy	
<b>3: Summer</b>	Data collection completed	Data collection started; <i>at least one 1<sup>st</sup>- or 2<sup>nd</sup>-author paper submitted</i>	Committee appointed
<b>4: Fall</b>	Dissertation defended; <i>internship applications submitted</i>	Data collection completed; <i>Internship applications submitted</i>	
<b>4: Spring</b>	Submitted for publication or presentation; <i>Internship secured</i>	Dissertation defended; <i>Internship secured</i>	IRB materials submitted; <i>required courses completed*</i>
<b>4: May 15<sup>th</sup></b>			Proposal approved
<b>4: June 15<sup>th</sup></b>			IRB compliance documented; admitted to candidacy
<b>4: Summer</b>	<i>Internship</i>	Submitted for publication or presentation; <i>Internship</i>	Data collection started; <i>at least one 1<sup>st</sup>- or 2<sup>nd</sup>-author paper submitted</i>
<b>5: Fall</b>	<i>Internship</i>	<i>Internship</i>	<i>Internship applications submitted</i>
<b>5: Spring</b>	<i>Internship</i>	<i>Internship</i>	Data collection completed; <i>Internship secured</i>
<b>5: Summer</b>	<i>Internship completed; Ph.D. awarded</i>	<i>Internship completed; Ph.D. awarded</i>	<i>Internship</i>
<b>6: Fall/Spring</b>			Dissertation defended; submitted for publication or presentation; <i>Internship</i>
<b>6: Summer</b>			<i>Internship completed; Ph.D. awarded</i>

## ***VI.B. Internship Readiness***

Each student's GAC reviews all of their clinical practicum evaluations and considers the breadth of clinical experience as part of the annual review process each year beginning in Year 2. As the student progresses toward and beyond completion of master's degree requirements it becomes increasingly important for the committee to specify areas in which further clinical training is required, and to assist the student in identifying opportunities for receiving such training prior to internship. Students play an important role in requesting this feedback from their GACs.

In May of the year in which the student plans to apply for internship, the GAC provides the student and the MPCC with its judgement of the students' readiness and indicates any particular areas in need of further development prior to or during the internship year. The summary of clinical experiences provided in the vitae and the Annual Report / Individual Development Plan, the student's accumulated clinical contact and supervision hours as well as testing and report-writing experience, as well as recent clinical competency ratings, all contribute to the GACs evaluation of the student's progress toward internship readiness. The MPCC, with ready access to accrued hours and clinical competency ratings as well as the recommendations of the GAC, provides the student with its preliminary feedback on his/her internship application plan. The program has not set quantitative thresholds for competency ratings or accrued experience, but rather makes its judgement based on the totality of each student's clinical training record as it relates to their internship training and career plans. Competencies are also examined with regard to the domains required by accreditation and the program's goals and objectives (see Table of Goals, Objectives, Knowledge and Competencies in Appendix E.)

In recent years all students who were released to begin the internship application process had been rated as "internship-ready" by more than one supervisor on at least 90% of rated clinical competencies and it was reasonable to anticipate internship readiness on all competencies prior to the beginning of the internship. In addition, all such students were on track to accrue at least 750 patient contact hours and 250 supervision hours prior to internship application deadlines.

Deadlines. Research training to a level of competency required for graduation and preparation of a quality dissertation depend on face-to-face interaction with the research mentor, and so the program aims for each student to complete and defend their dissertation before leaving for internship. Deadlines are established to help students and faculty meet this goal. **A student planning to apply for internship must defend their dissertation proposal by May 15th of the application year and must be admitted to candidacy for the doctoral degree by June 15th of the same year. Between August 1<sup>st</sup> and 10<sup>th</sup> the student must submit to the Program Director a memorandum requesting permission to apply to internships. This memorandum, which is signed by both the student and the dissertation chair, must include an up-to-date and specific report on dissertation progress and a projected timeline for completion and defense. Students should ensure that all clinical and research evaluations and activity logs are up-to-date and submitted to the program office by August 10<sup>th</sup>.**

Final approval for the student to apply for internship is issued by the MPCC at its regular August meeting. **Such approval implies confident prediction that the student will be internship-ready or nearly so on all clinical competency domains and will defend their dissertation before leaving for internship, or at most only minor data analysis and writing will be required during the internship year.** Questions about these conclusions may result of deferral of a decision to September or October, or the student may need to wait another year to apply for internship.

Finally, there are two further deadlines before the student may apply for internships

- a) Consistent with the goal of dissertation completion before internship, **all dissertation data must be collected.**

- b) Publication of research results is a core competency for students in any Ph.D. program that focuses on research and scholarship, and the UAB Medical/Clinical Psychology doctoral program aims for all students to publish papers while in graduate school. To help meet this program-level goal, **each student must submit for publication at least one first- or second-authored manuscript based on UAB work.**

### ***VI.C. Grades***

Courses Graded on the A-F Scale. At the graduate level, grades of A and B indicate that the individual has passed the course, while lower grades indicate a substantial failure to demonstrate acquisition of course content. D's are not assigned in graduate courses at UAB.

Please note the following program policies regarding grades of C or F:

1. A student who receives an F in any course must re-take the course.
2. A student who receives a C in a required course may be required to re-take the course. This decision is made by the MPCC after consultation with the GAC and course instructor.

Students may be dismissed from the program for poor academic performance. Situations that can lead to such dismissals are:

1. The student receives a third grade of C or F in required courses.
2. The student receives a fourth grade of C or F in any courses, regardless of whether the courses are required or elective.

Whenever a student receives a final grade of C in a required course the Program Director contacts the course instructor and the student's GAC to discuss opportunities for remediation. The student is offered a remediation plan followed by one opportunity to retake the course. A student may only have two such remediation opportunities thus preserving the three-C rule. If a student receives a C in a required course that is part of a sequence (e.g., statistics and research design, assessment, or intervention), the student may not be allowed to proceed in the sequence until the remediation attempt is completed. Such actions are decided on a case-by-case basis involving consultation among the Program Director, GAC, MPCC and relevant course instructors.

Courses Graded as Pass or Non-pass. Students receive grades of Pass (P) or Non-pass (NP) in the following experiential learning "courses":

PY 777 Psychotherapy Practice – Shadowing

PY 790 Clinical Internship

PY 797 Clinical Practicum

PY 698, 699, 798 and 799: Pre-Master's, Master's Thesis, Pre-Doctoral, and Doctoral Research

Incompletes. A grade of Incomplete (I) is assigned when there is a good reason why the work for a course could not be completed by the end of the term (e.g., illness). In such cases the student and instructor work out a schedule for prompt completion of coursework once the reason for the Incomplete has resolved. I's are automatically converted to F's if they are not explicitly changed to another grade by the end of the subsequent term.

#### ***VI.D. Good Academic Standing and Dismissal from the Graduate School***

UAB grades are represented numerically on a 4-point scale (A=4, B=3, etc.). The Graduate School defines good academic standing as a grade point average of at least a 3.0 based on courses graded on an A-F basis, and more Passes than Non-Passes in courses graded on a P/NP basis.

A graduate student whose grade point average and/or performance on P/NP courses do not meet the Graduate School's criteria for good academic standing is placed on academic probation (also known as conditional dismissal) by the Graduate School. The student then has two terms to rectify the situation to avoid dismissal from their graduate program and the Graduate School.

#### ***VI.E. Program Probation and Dismissal***

Although academic standing, probation and dismissal is determined by the Graduate School, additional criteria for satisfactory and unsatisfactory performance are established by program faculty. In the case of the Medical / Clinical Psychology Graduate Program, program faculty are represented by the MPCC.

Students in the Medical / Clinical Psychology Graduate Program may be placed on probation for reasons related to academic performance, research competency, clinical competency, professional conduct, interpersonal conduct, or failure to make adequate progress as outlined in Table 4. When a student is placed on probation, a letter from the Program Director (on behalf of the MPCC) is sent to the student and the Graduate School. The same procedures are followed for removing the student from probation.

A student who is placed on probation must be informed as to the reasons and must be given a deadline by which time the situation, grade, condition, or behavior is to be remedied. If the deadline is not met, the decision to extend the deadline or dismiss the student from the program is at the discretion of the MPCC.

Students may also be dismissed from the program for unethical conduct or behavior to the extent to which their further participation in the program is judged to be detrimental to themselves, others, the integrity of the Medical / Clinical Psychology Program or the profession of psychology. In such cases students may be dismissed from the program without being first placed on probation.

#### ***VI.F. Leave of Absence and Reinstatement***

Requests for leave of absence will be considered on a case-by-case basis. A leave of absence must be for serious and substantial reasons that cannot readily be addressed during a period of full-time enrollment. Requests must be submitted to the Program Director and require approval of the MPCC and the Graduate School. The length of the leave of absence must be specified. A student considering such a request is encouraged to discuss their options with their GAC in advance.

A request for reinstatement must be submitted to the Program Director in writing, and requires consultation with the GAC and approval of the MPCC and the Graduate School dean.

## ***VI.G. Residency Expectations and Requirements***

Program requirements, including the dissertation and pre-doctoral internship, are typically completed within 6 years of initial enrollment. Students who enter the program having already completed a master's degree in Psychology and/or relevant coursework may waive some requirements as described below under **Respecialization and Credit for Prior Academic Accomplishments**, and as a result may complete the program in less time. However, the nature of graduate study in clinical psychology, including supervised research and clinical practice, requires close contact over an extended period of time between each student and multiple program faculty. Therefore, we expect that with few exceptions students will be enrolled in our program full-time for at least five years, including the predoctoral internship year, and all students must be physically present on campus and enrolled full-time for a minimum of two years prior to one year of additional full-time enrollment while on internship.

## **VII. The Annual Review Process**

### ***VII.A. Annual Review by the Graduate Advisory Committee (GAC)***

Although meetings with the GAC may be scheduled at any time, each student must schedule a meeting with their full GAC near the end of each Spring semester and prior to the May annual review by the MPCC that is described below. The purpose of this meeting is to review the student's progress over the past year, discuss the student's career and training goals, and provide feedback on the student's progress and plans.

To prepare for this meeting, the student provides the committee with the following materials:

1. A completed *Annual Report and Individual Development Plan (AR/IDP)* that includes career goals, a self-assessment of required knowledge and skills, and plans and goals for the upcoming year, including coursework, research, and clinical training. This document and the associated process subsume the individual development plan that is required by the Graduate School and the federal government for students who are supported by federal research grants.
2. An updated checklist of course requirements.
3. An updated vitae (template available on Canvas).
4. for students in their 2<sup>nd</sup> year or later: A summary of clinical hours accrued, patients seen, tests administered, and interpretive reports written. The PractiTrack "AAPI Preview" is used for this purpose. All clinical activity logging should be up-to-date before generating this report.
5. Copies of research and clinical evaluations from the current or recently-completed Spring semester as provided by the mentor or supervisor (i.e., these need not include any student comments).

The program office provides GAC members with a tabulation of clinical competency ratings received thus far in the program as well as copies of all research evaluations and clinical supervisor comments from the prior calendar year.

At the meeting the student and GAC discuss the student's goals, progress and plans, as well as any areas of concern. The committee and student attempt to reach consensus on recommended changes to the students' plans that will facilitate achievement of their goals. After discussions with the student are complete, the student is excused and the committee meets on its own to rate the student's overall progress as well as specific progress in research, clinical training, and coursework over the past year. Where relevant, the committee also evaluates the student's internship application plans. The student receives informal feedback on these ratings and evaluations at the earliest possible time.

The student and GAC sections of the AR/IDP form are then completed by the student and GAC chair, respectively. Both individuals sign the form and distribute it to the other GAC members. This form provides the primary annual written feedback on the student's progress and plans. After the AR/IDP form has been completed and signed, the student uploads it (along with a copy of their CV) to the designated assignments on the program's Canvas site. Both the student and the GAC refer to this document throughout the year to help the student continue to make progress toward achieving their goals.

The meeting with the GAC is also an optimal time for the student to obtain signatures on *Clinical Practicum Agreements and Training Plans*, as well as requests to engage in extra paid employment, as all such plans should be evaluated in light of the student's AR/IDP.

### ***VII.B. Annual Review by the Medical/Clinical Psychology Coordinating Committee (MPCC)***

Following the end of each spring term the faculty members of the MPCC meets for a day-long session that is structured around scheduled reports from GAC chairs regarding the progress of individual students. Additional goals of this meeting are to assess the status of the program as a whole and identify issues that may require programmatic change. GAC chairs are responsible for preparing and presenting a brief report of their students' goals, training plans and accomplishments, as well as any areas of concern that may require remediation. The Program Director provides the MPCC with information on relevant metrics such as GPAs, publications, presentations and clinical hours and reports completed by all students for the MPCC's reference and consideration at this meeting as well.

The MPCC asks questions and provides feedback to each GAC chair during the meeting, and may make additional recommendations or set additional requirements for individual students based on this review. Such feedback is provided in constructive and specific terms so that students understand the steps they need to take to address areas of difficulty. Where the feedback from the MPCC substantially modifies or elaborates the feedback already provided to the student by the GAC, the student receives this amended feedback in written form. When appropriate, the GAC Chair and Program Director meet with the student to convey this feedback.

Another possible outcome of the MPCC review is a decision that the student's progress should be reviewed again by the GAC and MPCC prior to the next annual review. Reasons for such mid-year reviews can vary; they need not reflect a specific concern about the student's progress or performance but may instead reflect a desire of the MPCC to ensure that a potential problem has been resolved. The timing of such mid-year reviews is set on a case-by-case basis, balancing the need to monitor situations carefully while allowing reasonable and sufficient time for any problems to be addressed. Any requirement for a mid-year review is conveyed to the student in writing. Students are encouraged to discuss concerns that led to such requirements with their GAC Chairs, research mentors and/or the Program Director.

Finally, GAC chairs are encouraged to bring to the annual review meeting any concerns about program issues or characteristics that may be negatively affecting a student's progress or performance.

## **VIII. Student Funding**

### ***VIII.A. Funding for Admitted Students***

Students are admitted on a Blazer Graduate Research Fellowship or a research assistantship with the mentor, either of which covers the stipend plus payment of all tuition and fees for the first four academic terms (typically Fall of Year 1 through Fall of Year 2). Eligible students may also be nominated for other fellowships. Graduate fellowships do not have a specific work requirement but the student is expected to

be engaged full-time their graduate studies, including research activities with their research mentor. Research assistantships typically require 20 hours of research per week.

#### ***VIII.B. Funding via Research, Clinical, and Teaching Assistantships***

After the first four terms most students are supported on graduate assistantships, which fund students for activities that contribute to the research, clinical and/or teaching missions of the University. Graduate assistantships also serve a training function. Clinical assistantships typically include a 20 hour/week commitment that begins the first day of the Fall semester in one year and ends the day before the start of the Fall semester in the subsequent year. Research assistantships with the student's research mentor do not typically follow a strict guideline related to hours of commitment per week, as the student is generally contributing to the mentor's research program and the mentor is in turn supervising and collaborating with the student on their thesis, dissertation and/or related research. Questions or concerns about these issues should be discussed with the GAC chair and/or the Program Director.

During the Spring of each year, students explore opportunities for funding that will begin during the following Fall (or subsequent Spring, in the case of 1<sup>st</sup>-year students). Students are encouraged to first discuss opportunities with their research mentor that might help to support their research training and progress toward completion of the thesis or dissertation. These include not only funds that are available to the research mentor's control but also institutional training grants, described below. If such funds do not appear to be available then students meet with supervisors at any available assistantship sites that are of interest to them to discuss all relevant aspects of the assistantship including tasks to be performed, training goals, weekly schedule, holiday and leave arrangements, supervision, and evaluation. It is the student's responsibility to inform the assistantship supervisor of their projected class schedule for the following year, and students should not pursue an assistantship if there are serious conflicts between the class schedule and the assistantship site's requirements. Students should also responsible for informing a perspective assistantship supervisor of their plans to apply for internship. Students may accrue clinical practicum hours toward their internship applications in assistantship settings, provided that all policies established for clinical practica are followed.

Students who may want or need teaching assistantship support should inform the Program Director in April prior to the academic year in which they would serve as TAs. It is not unusual at this point for the student to be pursuing several funding options, but if a TAsip is one of them then the Program Director needs to know so that the Department of Psychology can make tentative plans.

Between April and June the student should keep the Program Director informed of how their funding situation for the upcoming year is developing. Once a student *accepts* an offer of an assistantship then the student and the supervisor should notify the Graduate Programs Manager and Program Director as soon as possible so that the necessary arrangements can be made. Students and assistantship supervisors should aim to finalize these decisions no later than the end of June if at all possible.

#### ***VIII.C. Institutional Training Grants***

These grants are funded to provide training to students in particular areas of institutional strength, such as cognitive neuroscience, neurodevelopmental disabilities and health care. Students who are funded through such training grants generally complete a training program that consists of some combination of research, clinical experience, and didactics which may include prescribed courses, seminars and/or lectures. Most such requirements will overlap with activities in which the student would participate even if they did not receive this funding, but some additional required training experiences should be expected because such experiences provide part of the justification for grant funding. Deadlines for applications for funding from such training grants are distributed across the year and students are encouraged to learn about those



deadlines at the earliest possible time so that opportunities are not missed. The application process for funding under such grants is competitive.

#### ***VIII.D. Individual Federal and Foundation Fellowships***

The program strongly encourages students to seek extramural funding for their graduate training. The UAB Graduate School offers incentives for students who seek external grant funds, and greater incentives for those who are successful in obtaining such funds. Some options are:

1. Most institutes of the NIH award individual National Research Service Awards (NRSAs; also known as F31's or individual pre-doctoral fellowships), which generally fund students at a level higher than the minimum assistantship level and provide additional support for tuition, travel, research costs, and/or other expenses associated with graduate training. Since most students are expected to complete internships and post-doctoral fellowships, and ultimately seek employment, in settings where successful grantsmanship is valued or even necessary, early experience with the NIH funding system provides useful and relevant training. F31's typically fund students over a two-year period associated with completion of the dissertation.
2. The National Science Foundation sponsors a Graduate Research Fellowship program that provides 3 years of full support at a stipend level that is significantly higher than that of program fellowships and assistantships. Graduate students apply for such awards as early as October of their first year of graduate school and students may not apply after their second year. Consult the NSF website for up-to-date information on deadlines and eligibility.
3. Private foundations (e.g., American Heart Association) and other federal agencies (e.g., Federal Highway Administration Eisenhower Transportation Fellowship Program) are other potential sources of funding for support of graduate students and their research. Students are encouraged to consult with their research mentor, GAC, and Program Director, and to conduct research via such sources as the Internet, to learn about such opportunities and the optimal timing of such applications.
4. Some foundation grants and scholarships, such as most of those that are offered by the American Psychological Foundation, are limited to a few applications per department. Students should e-mail both the Department of Psychology chair and their program director at least 1 month before the deadline if they would like to be a departmental nominee. If there are more requests than the number of nominees that are permitted for a particular grant or scholarship, then the chair will select the nominee based on draft applications submitted by each student.
5. Students who are interested in speaking with other students who have obtained various grants can contact the program director. Some students may be willing to share grant materials, and the Center for Clinical and Translational Sciences maintains a repository of successful applications. Both students who are willing to share and students who wish to review prior applications are encouraged to contact the CCTS.

Students admitted to the program on Blazer Graduate Research Fellowships are expected to submit at least one individual predoctoral fellowship application over the course of their graduate training, and other students are strongly encouraged to do so as well. The program provides training in grant writing through seminars and courses. Specific plans for such submissions should be developed with the research mentor.

Students who are planning to apply for a grant should establish contact at the earliest possible point with the appropriate financial administrators, who will serve as a conduit for submission of your grant

application to the university's Office of Sponsored Programs. The Research Office in the College of Arts and Sciences will provide this service or direct you to the appropriate individual in another department. When you contact them, be sure to indicate and provide a web link to the description of the grant program and the name of your research mentor or grant sponsor, and copy your Program Manager and Program Director. It's important to start this process **a month or more ahead of the grant deadline** so the required timeline for submission of your materials can be established and followed. Contact the Program Manager and Program Director immediately if your grant is funded, and provide the Program Manager with copies of all correspondence that you receive from the granting agency.

#### ***VIII.E. Extra Paid Employment ("Additional Assignments")***

In general, students on UAB fellowships (including new-student fellowships) are prohibited from engaging in extra paid employment of any kind. Rules concerning such employment for other students vary with the funding source. Students who are considering extra paid employment are encouraged to consult with the Program Director, who can assist the student with determining the rules related to their specific situation.

Not all sources of funds for extra paid employment are compatible with all sources of the student's primary funding. Students are encouraged to contact the Program Director and Program Manager as soon as such employment is being considered to discuss this issue.

In addition to program (MPCC) approval, Graduate School approval is also required for students engaging in extra paid employment through UAB. Students considering such employment should consult with the Program Manager, who will guide the student through Graduate School procedures. Failure to follow those procedures will typically delay or prevent payment for services rendered.

The following program policies and procedures relate to students engaging in extra paid employment of a psychological nature (e.g., providing clinical services, assisting with research, or teaching):

1. Students should obtain and complete an *Extra Paid Employment Form*, to be signed by all members of their GAC including their thesis or dissertation chair as appropriate to their stage of progress through the program. The completed form should be submitted to the Program Director for consideration by the MPCC, which makes the final decision regarding the student's request. It is crucial that students who desire to undertake such employment consult with their GAC and submit their request for approval by the MPCC at the earliest possible time before employment is to begin. At the Program Director's discretion the MPCC approval may be by handled by e-mail.
2. Both the beginning and ending dates for the proposed employment must be specified. No request may span more than one year (12 months, irrespective of the academic calendar).
3. Students must be making at least Good Progress on benchmarks described in this handbook to be approved for extra paid employment. Additional considerations include the quality of the planned work experience, related to the student's training goals, and the intensity of planned supervision in relation to the tasks required, population served, and the student's level of experience and competence.
4. Special considerations regarding teaching. Teaching can be a valuable training activity. It can help to enhance and solidify knowledge, provide practice in public speaking, and help prepare students for professional roles that involve education of colleagues, patient groups and the public. Effective teaching also requires sustained commitment of time and energy. The following special considerations relate to requests to teach for additional compensation, or as part of a teaching assistantship.

- Students are discouraged from teaching for extra pay in Year 2. For most students, Year 2 represents a major transition with the addition of assistantship-related work requirements and clinical activities, even as course requirements continue. Moreover, at the point at which teaching schedules are created the GAC and MPCC have little basis for predicting the student's ability to handle the increased workload of Year 2 while teaching and continuing to make steady progress on research.
  - Students are also discouraged from teaching during the academic year in which they apply for internship. Preparation of applications during the fall and travel to interviews during the fall and spring interfere with the student's ability to meet their classes reliably, maintain availability to students during office hours, and in general dedicate appropriate attention to teaching. For most students the internship application year is also a critical time for making progress on the dissertation prior to leaving for internship.
  - Students should teach only subjects in which they have completed relevant graduate-level coursework. This is an ethical issue akin to the requirement that clinicians practice within the boundaries of their training and expertise.
  - Students who teach should have a designated faculty mentor who has experience teaching the same or a closely-related course. The mentor must agree to review course materials (e.g., syllabus) prior to the beginning of the term and observe at least one class and provide written feedback.
  - If all of the above-mentioned guidelines are met – the student is making good progress, will be at least in Year 3 in the program and will not be applying for internship during the proposed teaching year, and has completed relevant graduate-level coursework – the Program Director may approve a request to teach for extra paid employment based on the recommendation of the GAC and without further approval by the MPCC.
5. Where appropriate, extra paid employment is subject to other program requirements. Clinical work for which the student wishes to accrue hours toward internship applications must follow all practicum procedures, described above. The practicum agreement/training plan and extra paid employment form should be submitted together. Teaching evaluations should be submitted to the program office and to the GAC as part of the annual review process.

Somewhat different rules apply when a student desires to engage in compensated work that is *not* of a psychological nature. The student should inform their GAC, including the research mentor, who may advise the student as to the appropriateness of this activity. Following these discussions, if the student decides to engage in such employment the GAC chair will advise the MPCC of the student's decision. Although MPCC approval is not required for non-psychological extra paid employment, such employment is prohibited for students on fellowship and other traineeships unless approved by the Graduate School Dean.

#### ***VIII.F. Guaranteed Stipend, Tuition and Fee Support for Graduate Students***

Beginning in 2012, the Department of Psychology began guaranteeing stipend and tuition support to all Psychology graduate students for a period of 5 years beginning with their initial matriculation into the program. Departmental policies regarding the implementation of these commitments are provided in Appendix B. Note that lab fees are covered but the fee associated with submission of each Application for Degree (\$60) is not. Other questions concerning these policies should be directed to the Psychology Graduate Programs Manager or the Program Director. Please note that support originating outside the Department of Psychology does not extend the term of this guarantee.

## **IX. Miscellaneous Policies, Guidelines and Procedures**

### ***IX.A. Vacation, Leave, and Holiday Guidelines***

Graduate programs in the Department of Psychology expect all students to be engaged full-time in program-related activities, including during periods between academic terms. That said, we recognize the importance of rest and relaxation and anticipate that the quality of students' research, teaching, and clinical work will benefit from reasonable time off in the form of vacations and holidays. We also recognize that students occasionally need to be absent for other reasons, for example due to professional travel or illness. The following guidelines are intended to set expectations for students and their mentors, instructors, and assistantship and clinical supervisors regarding how such absences are handled.

1. Graduate students are permitted to take up to 3 weeks or 15 calendar days of vacation each academic year. This includes any time taken off between academic terms or during spring and fall breaks, even though classes are not in session. Please note the following:
  - a. Vacation must be requested and approved in advance by the relevant research mentor(s), assistantship supervisors, and clinical practicum supervisors.
  - b. Students should not schedule vacation that causes them to miss classes. Instructors are neither required nor expected to accommodate vacation-related absences.
2. Professional leave (e.g., to attend conferences or to interview for post-docs or internships) does not count as vacation. Students are expected to provide supervisors and instructors with ample notice of such absences, which should not require them to miss more than 10% of classes for a single course or 10% of scheduled clinical practicum and assistantship days within a 4-month period.
3. Graduate students are also permitted to be absent for up to 6 calendar days each year on account of health issues (1/2 day per month). Ill students should notify affected research, teaching, and clinical supervisors, or the main Psychology office if the student has instructional responsibilities, at the earliest possible time. Students with disabilities that regularly require additional absences should consult Disability Support Services, which can provide guidance to the student, instructors and graduate program.
4. Individual mentors, assistantship supervisors and practicum supervisors determine whether and how to track utilization of vacation, professional leave, and sick leave, and decide whether to allow excess absences to be made up. They may also establish policies for advance notice for vacation and professional leave.
5. Students are entitled to the following UAB Holidays: New Year's Day, Dr. Martin Luther King, Jr. Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving and the day after, and Christmas Day. With ample advance notice, mentors and other supervisors are expected to honor requests for time off to observe other major holidays associated with the students' religion or cultural heritage.
6. Absences for bereavement or other personal emergencies should be arranged with supervisors and instructors on a case-by-case basis. Students should notify the program office of any such absences of more than two consecutive business days.
7. Psychology graduate students are entitled to 30 consecutive days of excused absence upon the birth or adoption of a child. Both parents are eligible.

8. Questions and concerns about these guidelines or their application in specific cases should be brought to the attention of the student's program director.

### ***IX.B. Respecialization and Credit for Prior Academic Accomplishments***

The Medical / Clinical Psychology Program does not offer a respecialization program. However, all individuals approaching or beyond the bachelor's degree level are eligible to apply for admission, and this includes individuals with a Ph.D. in non-clinical fields of psychology. Such students will be eligible for admission through the same process as that used to admit other students and will be eligible for the same financial support as other students in the same cohort. As a general rule, individuals accepted into this program will have their credentials reviewed, and will receive credit for past accomplishments that can stand in lieu of program requirements. All requests for credit for prior work should be submitted to the Program Director as soon as possible following admission to the program, and no later than November 1<sup>st</sup> of the student's first year in residency. Decisions on such requests will be made on a case-by-case basis by the MPCC. However, in no case will a student receive credit for more than half the program's required credit hours of regular coursework, nor will a student receive credit for a dissertation completed elsewhere.

Several specific requirements also apply:

1. Students wishing to submit coursework from another graduate program to satisfy a Medical / Clinical Psychology curriculum requirement should submit all available course materials and evaluations (syllabus, tests, grades, etc.) to support their request. The Program Director will solicit an evaluation of these materials from the instructor of the corresponding course in our program, and if the corresponding course is a prerequisite for another course in our program, then the input of the instructor for that course will be obtained as well. If neither course instructor is available, then the Program Director may seek other faculty input. Ultimately, the Program Director submits all feedback from faculty to the MPCC, which makes the final decision about the requested course substitution.
2. Students coming to UAB with a completed master's degree and thesis in psychology from an accredited institution are not required to complete a master's thesis or earn a master's degree in the Medical / Clinical Psychology Graduate Program. Such students should, however, submit their theses to the Program Director and research mentor, once determined, who may review it as a basis for recommending coursework or other training experiences.
3. Requests for credit for prior clinical training (in particular PY 777 Psychotherapy Practice–Shadowing or the introductory psychotherapy practicum) should take the form of a memo to the Program Director that describes the prior training in detail and names the clinical supervisors. Attach a letter confirming this information from the director of the program in which the training was undertaken. The Program Director submits these materials to the MPCC with a recommendation regarding the student's request.

### ***IX.C. Admission of Non-Clinical Psychology Students to Medical/Clinical Psychology Courses***

Most of the courses developed originally for students in one graduate program within the Department of Psychology are open to students in the other graduate programs. With permission of the instructor, these courses are open to students from outside Psychology as well.

Courses that have a strong clinical component are not open to students outside the Medical / Clinical Psychology doctoral program. These courses include:

- PY 701 Professional Issues and Ethics
- PY 721 Neuropsychological Assessment
- PY 741 Child and Adolescent Psychopathology and Treatment
- PY 760 Interviewing & Behavioral Observation
- PY 765 Personality Assessment I
- PY 769 Cognitive Behavior Therapy
- PY 770 Survey of Psychotherapeutic Methods
- PY 772 Behavior Therapy
- PY 777 Psychotherapy Practice – Shadowing
- PY 779 Foundations of Clinical Supervision & Consultation
- PY 790 Clinical Internship
- PY 797 Clinical Practicum

Non-degree-status students should also be aware of Graduate School rules limiting the number of non-degree credit hours that may be applied to the graduate curriculum.

#### ***IX.D. Requesting a Waiver of a Policy or Requirement***

A student requesting an exception to any program policy or requirement should first seek the guidance and support of their GAC and consult with the Program Director. However, even in the absence of support of the GAC or Program Director, the student is free to petition the MPCC in writing to request a waiver or exception.

Although the program attempts to respond to rational justifications for waiving program requirements, there is reason for caution. There are 50 U.S. states plus various territories with individual licensing boards and certification requirements. Though all recognize the American Psychological Association Commission on Accreditation's guidelines for training for clinical psychologists, some jurisdictions have additional and idiosyncratic licensing requirements. Interns applying for and hoping to accept post-doctoral positions in states with additional requirements may need to take one or more additional courses, over and above those required for graduation from our program to meet these requirement. Students are urged to start early to familiarize themselves with licensing requirements in regions where they might ultimately choose to live and work.

Upon notice of offer for a position in such a state or other entity that requires additional coursework or training, there are several options that may allow students to complete the requirement before completing the internship or soon after. After consulting with the appropriate licensing board and determining their additional training needs, students may be able to:

1. Take and pass a web-based, online course, such as may be offered by one of the many APA-approved training sites for continuing educational credit;
2. If a special idiosyncratic course is required the Program Director may be able to help arrange a readings course supervised by a UAB faculty member;
3. A local university or training program, including possibly the internship site, may be able to provide the additional course or training.

There may be other options as well. It is the responsibility of the student to identify where their first postdoctoral position will be, inquire about license eligibility as soon as possible, and follow-up as required. The Medical / Clinical Psychology Doctoral Program will provide assistance whenever possible.

### ***IX.E. Statement on Professional Licensure***

Professional licensure is required or useful for professional health service practice, research, education, and public service within the field of clinical psychology, and graduation from an accredited program such as Medical/Clinical Psychology is sufficient to meet educational requirements for licensure in most states and territories. However, all U.S. jurisdictions require additional training, supervised clinical experience, and/or passage of one or more examinations before a professional license is granted. For more information on requirements of specific states and territories, please visit UAB's [Professional Licensure and Certification General Disclosures](#) webpage.

### ***IX.F. Grievance and Appeal Procedures***

Students and faculty are expected to handle minor difficulties and disagreements with face-to-face conversation among the parties involved. All program faculty, including GACs, the Program Director, and research and clinical supervisors are responsible for working to ensure that the students' progress through the program is unimpeded by unnecessary difficulties. Students are encouraged to discuss concerns and disagreements with the Program Director and/or their Graduate Advisory Committees to help determine whether they can be resolved informally.

If a student feels that the matter is more serious or intractable, and wishes to file a formal grievance or appeal a decision, then they should consult the policies related to student complaints in the Graduate Catalog (<http://catalog.uab.edu/graduate/academicprogress/#academicethicsandmisconducttext>). Due to the cross-campus nature of our program, grievances should generally be submitted to the Program Director, who will involve the department chair to the extent required. Should a grievance extend beyond the Medical / Clinical Psychology Graduate Program, address the Program as a whole, or pertain to the Program Director, Chair of Psychology, or the Chair of the PTC; or should a student wish to appeal the outcome of the grievance procedure as implemented at the program level; then a grievance or appeal may be filed with the Dean of the Graduate School.

Students are encouraged to review all sections of Graduate Catalog dealing with Academic Progress (<http://catalog.uab.edu/graduate/academicprogress/#text>).

### ***IX.G. Ethical Conduct and Commitment to Diversity***

The Medical / Clinical Psychology program is committed to training students in ethical and legal conduct, consistent with the American Psychological Association's *Ethical Principles of Psychologists and Code of Conduct*, inter alia. Students are also bound to abide by the policies of the UAB Graduate School and the university as a whole, including the Academic Honor Code and the Non-Academic Student Conduct Policy. All students should familiarize themselves with these documents, which can be accessed at <http://catalog.uab.edu/graduate/academicprogress/#academicethicsandmisconducttext>.

The Program is also committed to attracting diverse students and faculty, and to providing a welcoming and supportive environment for everyone, consistent with university policy:

## **UAB's Equal Educational Opportunity Policy**

*As an institution of higher education and in the spirit of its policies of equal employment opportunity, UAB hereby reaffirms its policy of equal educational opportunity. UAB prohibits, and will not tolerate, discrimination in admission, educational programs, and other student matters on the basis of race, color, religion, sex, sexual orientation, gender identity, gender expression, age, national origin, disability unrelated to program performance, veteran status, or genetic or family medical history. Complaints by any applicant or student who has reason to think [they have] been affected by discrimination will be considered through appropriate established procedures.*

See <http://www.uab.edu/policies/content/Pages/UAB-BT-POL-0000052.aspx> for the Equal Opportunity and Discriminatory Harassment Policy and associated complaint procedures. Students who believe that they have been subject to discrimination and/or harassment in *any* setting related to their graduate training are strongly encouraged to contact the Program Director; concerns regarding the Director should be discussed with the Chair of the Department of Psychology. We recognize gender discrimination to include sexual and gender-based harassment and discrimination related to pregnancy and parental status.

### **IX.H. Records Management and Retention**

The Medical / Clinical Psychology Doctoral Program maintains its records in compliance with UAB's Records Retention Policy and the federal Family Educational Rights and Privacy Act (FERPA).

Our goal is to maintain in perpetuity all records relevant to each student's graduate education. These include course syllabi, grades, theses, dissertations, vitas, and clinical training records including supervision contracts (Agreement and Training Plan forms), records of clinical activities, and research mentor and supervisor evaluations. Program operating procedures are implemented to help us to achieve that goal to the extent that is reasonably possible. We are often called upon to provide such records for individual graduates, and we use these records for program monitoring and improvement, as well as accreditation and funding purposes.

Students are cautioned, however, that our data management procedures are evolving and are partially dependent on personnel and technology that are outside of our program's direct control. Therefore, we cannot guarantee that all records will be available for all of our graduates if needed at any time in the future. Students are therefore strongly encouraged to make their own records retention arrangements. One possibility is the credentials banking facility that is provided through the Association of State and Provincial Psychology Boards (ASPPB). More information is available on their website. The summary of clinical hours provided by our practicum tracking software (PractiTrack) includes a summary of clinical hours sorted for their system, which differs from that required for internship applications.

### **IX.I. Other Relevant University Policies**

The university has additional policies that are relevant to graduate students and other members of the UAB community, and are therefore described in documents available on the UAB website. These include:

- Policy Concerning the Responsible Conduct of Research and Other Scholarly Activities (<http://www.uab.edu/policies/content/Pages/UAB-RA-POL-0000263.aspx>)
- Copyright Policy (<http://www.uab.edu/policies/content/Pages/UAB-RA-POL-0000035.aspx>)
- Patent Policy (<http://www.uab.edu/policies/content/Pages/UAB-RA-POL-0000115.aspx>)
- Student Records Policy (<https://www.uab.edu/students/one-stop/policies/student-records-policy>)
- Computer Software Copying and Use Policy (<http://www.uab.edu/policies/content/Pages/UAB-IT-POL-0000028.aspx>)



- Policy Concerning Employee Falsification of UAB Records and Documents (<http://www.uab.edu/policies/content/Pages/UAB-AD-POL-0000255.aspx>)

Federal laws concerning academic and health records often apply to graduate students and faculty in the Medical / Clinical Psychology Graduate Program, depending on their teaching, research, and/or patient care responsibilities. These include:

- Family Educational Rights and Privacy Act (FERPA)
- Health Insurance Portability and Accountability Act (HIPAA)

The Code of Federal Regulations governs the conduct of human research and the roles of investigators and Institutional Review Boards. The most relevant section is 45CFR46 (Title 45 Part 46), dealing with protection of human subjects. Conduct of animal research is governed by a comparable set of regulations; consult the UAB Institutional Animal Care and Use Committee (IACUC) office for further information.

The Program Director, MPCC, and individual faculty (including research mentors and clinical supervisors) share responsibility for ensuring that applicable university policies and ethical standards are followed, and for informing students of policies, laws and regulations that are relevant to any activities in which students are engaged under their supervision.

## Appendix A: Handbook Revision History

October 17, 2012:	Inserted footnote explaining GAC terminology conflict between graduate school and program.
	Clarified approval process for thesis and dissertation committees, indicating that these approvals must be completed before the corresponding proposal defenses are scheduled.
November 17, 2012:	Added note to benchmarks table, giving general guidelines for students who enter the program with a master's degree in psychology (approved by MPCC on 11/16/2012).
	Removed requirement that students must complete at least two semester hours of PY 798 with each of two faculty (approved by MPCC on 11/16/2012).
	Clarify issues and process associated with moonlighting requests.
	Clarify that a prior master's thesis and degree in psychology from an accredited institution does not require approval by the program as a basis for waiving the master's requirements here. The thesis will, however, be used by the GAC and dissertation chair as a basis for advising on recommended course work or other training experiences (approved by MPCC on 11/16/2012).
December, 2012	Corrections to semester hour counts following deletion of PY 739.
	Added form names, clarified related text, and fixed related typos.
April 4, 2013	Revised section on Extra Paid Employment (approved by MPCC on 2/15/2013).
July 19, 2013	Revision to the clock hour / credit hour conversion formula for clinical practica and research (approved by MPCC on this date).
August 16, 2013	Added reference to MyPsychTrack to the body of the manual, and the transition policy to the appendix (approved by MPCC on 7/19/2013).
	Added reference to the grievance and appeals procedures in the Graduate School's <i>Graduate Student Handbook</i> .
	Modified Table of Contents to include listing of tables.
	Added further references to the Blackboard site, and rearranged sections within Parts VI and VIII to improve logical flow.
February 19, 2014	Added Appendix D containing updated Progress Benchmarks approved by MPCC at its January 2014 meeting, to replace section VI.A. of this handbook in August 2014.
April 25 – May 10, 2014	Reduced the number of required semester hours of PY797 Clinical Practicum in Medical/Clinical Psychology from 12 to 6 hours.
	Adjust documentation requirements for research and clinical practica: <ul style="list-style-type: none"> <li>• Agreements are no longer required for research (PY 798). An agreement with the research mentor is implicit.</li> <li>• Agreements for clinical practica (PY 797) now last up to 1 year.</li> <li>• MyPsychTrack recording and supervisor verification is now mandatory for all students except those applying for internships in 2014.</li> </ul>
	Changed "Advisement" section to "Mentoring and Advising", and added a subsection on the Research Mentor.
	Created an appendix of MyPsychTrack instructions for students.
June-July, 2014	General cover-to-cover review, reorganization and revision of the handbook for improved readability and consistency with current procedures, especially those related to the annual

	review by the GSC and MPCC, and to documentation requirements for clinical practica. Integrated new program progress benchmarks.
	Updated appendix on AAPI hour and activity tracking with material from APPIC website and feedback from APPIC regarding how activities are to be tracked, responding to questions raised at June student meeting.
August-December 2014	Revision policy added to the section entitled “This Handbook” on p. 1.
	Update to incorporate policy that research mentors (i.e., thesis and dissertation chairs) must be included on students’ GSCs. Updates to the description of the annual review to comply with individualized development plan requirements. (Sections II.B. and VII.A.)
	Change wording to indicate that students may defer required courses to Year 4 to allow time for individually-relevant electives to be completed in earlier years. Add GRD 717 Principles of Scientific Integrity as a required course. (Section III.A.)
	Add section on specialized training modules, both required (e.g., HIPAA, diversity training) and optional. (Section III.E.)
	Updates for switch to Plan I for the master’s degree for students proposing in 2015 or later. Major revision of steps toward degrees to integrate M.A. and Ph.D. procedures. IRB approval policy clarified. Plan II master’s wording will be removed after all affected students have completed their master’s degrees. (Sections V. and VII.)
	Add language stipulating that research mentors (thesis and dissertation committee chairs) must be doctoral-level psychologists, with exceptions approved by the MPCC. (Section V.B. Step 1)
	Add reference to Graduate School documentation for the reprint/preprint option for the thesis or dissertation. (Section V.B. Step 5)
	Note that students who complete their internships after the first day of classes for the fall semester will officially graduate in December rather than August. (Section V.B., Step 8) (superceded)
	Add language to charge the thesis and dissertation committees with assessment of students’ broad knowledge of the field, and with prescribing steps to address any deficiencies. (Section V.B. Steps 5 and 10)
	Minor changes to benchmarks for thesis and dissertation, changing reference to “thesis IRB” to documentation of IRB/IACUC compliance and combining deadlines for proposal defense, compliance documentation and admission to candidacy. (Section VI.A.)
	Add language to charge GSCs with assessing the student’s readiness for internship based on practicum experiences and evaluations, and to communicate the results of that assessment to the MPCC as part of the annual review process in the year in which the student wishes to apply for internship. (Section VI.B.)
	Add recommendation that the MyPsychTrack AAPI Export Preview be used to communicate accumulated clinical experience to the GSC as part of the annual review. (Section VII.A.)
	Elimination of section on Merit Fellowships based on redirection of corresponding funds by the College of Arts and Sciences. (Section VIII.)
	Further updates to the appendix on tracking hours and activities for the AAPI, including a) definitions of disability in general and several specific disabilities (developmental, learning/cognitive, serious mental illness, serious emotional disturbance), b) further clarification of procedures for counting reports and tests, c) summary language encouraging consultation with others but noting that the student and DCT are principally responsible for

	accuracy of the clinical training record on the AAPI, and d) addition of a list of “data integrity checks” that the student and/or program can make. (Appendix C)
February - April, 2015	Require a teaching mentor for students who teach on an ad hoc (“moonlighting”) basis. (approved by MPCC on 4/17/2015)
	In the description of the GSC, change “Each GSC member must be a doctoral-level psychologist with a faculty appointment at UAB.” To “Each GSC must include at least three doctoral-level psychologists with faculty appointments at UAB.” Change is to accommodate students with a research mentor who is a behavioral scientist but with a professional affiliation outside psychology. (approved by MPCC on 4/17/2015)
	Change III.E. from “Specialized Training” to “Opportunities for Additional Learning.” Change wording to require students to attend one thesis or dissertation proposal or defense meeting per year. (approved by MPCC on 4/17/2015)
	Add the following to Section IV.D. Clinical Supervision Standards: Clinical supervisors are generally licensed psychologists who are vetted through their membership in the Psychology Training Consortium. Exceptions for other licensed mental health professionals are approved through the Medical/Clinical Psychology Coordinating Committee. (approved by MPCC on 3/25/2015)
	Expanded Section IV.E. Documentation Requirements for Clinical Practica to clarify exceptions to agreement and evaluation requirements related to PY778 Psychotherapy Practicum – Initial. [No change in policy; informational item to MPCC.]
	Multiple revisions to Section VII. Annual Review Process for consistency with changes to that process made to integrate Individual Development Plans, as required by the Graduate School and NIH. (approved by MPCC on 3/25/2015)
June, 2015	Addition of Appendix D, Special Considerations for Interns. A similar document was previously distributed to interns each year. Moving the information to the handbook ensures that all students have timely access to this information. [to MPCC as information item on 6/19/2015]
	Additions to Appendix C Instructions for Logging Clinical Hours and Activities: 1) Clarification from the AAPI instructions of what constitutes supervision of other students. 2) Mention that one can round hours up, also from the AAPI instructions. 3) Inclusion of case management and case conference meetings in which the supervisor provides the student with feedback on patient care as an example of an activity that could be counted in multiple categories, although Supervision would generally be preferred over Support. 4) Clarification of what may be logged for research-related assessments, supervision and support. [to MPCC as information item on 6/19/2015]
	Add submission of a 1 <sup>st</sup> - or 2 <sup>nd</sup> -author manuscript for publication as a requirement for applying for internships, beginning in 2016. Add having at least one publication (published or in press) by the time each student graduates as a program-level goal. [approved by MPCC on 6/19/2015]
July, 2015	Change progress benchmarks: 1) Relax completion of all coursework benchmarks. 2) Move thesis proposal drafted and Thesis IRB materials submitted from Fall of Year 2 to Spring of Year 2 for minimally adequate progress. 3) Change all references to “minimally adequate progress” to simply “adequate progress” 4) Eliminate distinction between research and non-research benchmarks. [approved by MPCC on 7/16/2015]

September, 2015	1) Addition of PY779 Foundations of Clinical Psychology Supervision as a required course. 2) Revision of policies and goal regarding intensity of clinical supervision. [approved by MPCC on 9/18/2015]
January –August, 2016	1) Add explicit statement of Program Mission and Goals [Preliminary material] 2) Checked and updated all web links (URLs). Added request to report dead links. [Preliminary material and throughout] 3) Minor rewording of the purpose for which we are accredited consistent with accreditation requirements [I. Program Sponsorship, Accreditation, and Administrative Structure] 4) Minor rewording of description of research orientation for first year students to focus on familiarity with research resources. [II. Mentoring and Advising] 5) Substituted “Graduate Advisory Committee” for “Graduate Study Committee” (and “GAC” for “GSC”), where appropriate; i.e., where the reference is not to the thesis or dissertation committee. [Throughout] 6) Addition of explicit statement that the required curriculum may change while students are enrolled in the program and the issues that the MPCC considers in making such changes and applying them to already-matriculated student. [III.A. Required courses] 7) Changes to list of required courses consistent with MPCC decisions regarding biological bases and medical/health psychology requirements. [Tables 1 and 2] 8) Changes to the presentation of the required course sequence to show those courses that need to be taken in a particular term and reflect flexibility in when the student takes other required courses. [Table 2] 9) Added caution concerning financial responsibility for tuition for courses taken in the Master’s of Science in Public Health program. [III.F.] 10) Added explicit description of the role of primary supervisor for clinical practica. [IV.D. Clinical Supervision Standards and Appendix C. Instructions for Logging Clinical Hours and Activities] 11) Replacement of references to MyPsychTrack with references to PractiTrack, and modifications to related procedures such as verifications of activities. [IV.E. Documentation Requirements for Clinical Practica] 12) Removal of instructions for Plan II master’s as nearly all students under this plan have completed their master’s or are in final stages. [V.B. Steps for Completion of the Master’s and Doctoral Degrees] 13) Added request for a brief written justification when a proposed thesis or dissertation committee requires the addition of a member without Graduate Faculty status, consistent with new Graduate School policies. [Section V.B., Step 2] 14) Clarified and added emphasis to the thesis/dissertation step dealing with documentation of IRB/IACUC compliance. 15) Reorganization of benchmark tables such that rows are terms and dates and cells contain tasks completed. Addition of instructions for use of these tables. [VI.A. Progress Benchmarks] 16) Addition of section on residency requirements and expectations, as required for accreditation. [VI.G.] 17) Addition of section on funding through institutional training grants. [VIII.C.] 18) Noted importance of Graduate School approval of extra paid employment. Deleted archaic reference to “moonlighting” [VIII.E. Extra Paid Employment] 19) Addition of section IX.F. Records Management and Retention, to describe the program’s goals in this area and also encourage students to use the ASPPB records banking system. 20) Addition of PY 779 Foundations of Clinical Psychology Supervision to the list of courses open only to Medical/Clinical Psychology students. 21) Substantial re-write of Appendix C Instructions for Logging Clinical Hours and Activities to eliminate reference to MyPsychTrack and replace it with instructions for PractiTrack. However, specific documentation on use of PractiTrack is provided in the documentation for that program, and so this appendix now focuses more on guidelines for clinical activity tracking and much less so on the particulars of software use.

October, 2016	1) Edited Extra Paid Employment section which did not reflect the requirement that the research mentor serve on the Graduate Advisory Committee.
Summer, 2017	<ol style="list-style-type: none"> <li>1) Integrate the Table of Training Goals and Associated Objectives, Knowledge and Competencies into the body of the document at appropriate places (description of curriculum, clinical training and internship readiness) and add to the Appendix.</li> <li>2) Remove the core clinical competencies table from the description of clinical training, as it was redundant with the Training Goals, Competencies, etc. table reference above.</li> <li>3) Update information on course requirements and scheduling in both tables and text. Note that the <i>most</i> up-to-date information is available from the Program Director.</li> <li>4) Update the section on Extra Paid Employment to address incompatibilities in funding mechanisms that may preclude certain forms of EPP in some cases.</li> <li>5) Remove all references to PY 778 but retain reference to the introductory psychotherapy practicum.</li> <li>6) Correct the phone number for the Commission on Accreditation of the APA.</li> <li>7) Add text dealing with making changes to the membership of the GAC.</li> <li>8) Delete references to the GSC.</li> <li>9) Indicate the role of the GAC and supervisors in ensuring that practica build appropriately on the student's prior coursework and clinical training.</li> <li>10) Delete references to Plan II for the master's degree.</li> <li>11) Add encouragement to students to summarize in writing any changes to research plans that are made at thesis or dissertation proposal meetings or in the process of conducting the research.</li> <li>12) Add PY 779 Foundations of Clinical Supervision and Consultation to the section on clinical training sequences and the list of courses that are not open to students outside the Medical/Clinical Psychology doctoral program.</li> <li>13) Clarify the process of approval to apply for internship.</li> <li>14) Clarify that assistantships with the student's research mentor do not typically follow a strict limit in terms of hours/week.</li> <li>15) Eliminate references to the Department of Psychology in mention of predoctoral grant incentive programs.</li> <li>16) Internship Considerations appendix greatly expanded to include information related to preparing internship applications that has previously been distributed by e-mail.</li> </ol>
9/6/2017	Correct details in the section of Appendix D dealing with the potential problem with tabulation of tests interpreted in reports and entered in MyPsychTrack.
1/22/2018	Remove reference to <i>Graduate Student Handbook</i> as the Graduate School no longer publishes this document.
Spring 2018	<ol style="list-style-type: none"> <li>1) Update Tables 1 and 2 for changes to Research Design.</li> <li>2) Refer to the <i>Course Scheduling Plan</i> that is posted on the website rather than repeating that information in the handbook.</li> <li>3) Extensive editing on the steps for completion of the master's degree and doctorate to correct errors and reflect changes in Graduate School procedures.</li> <li>4) Minor changes to the section on Extra Paid Employment to alert students and mentors to the possibility that funding sources for such employment may be incompatible with the student's "base" funding.</li> <li>5) Elaboration of section dealing with individual research grants and grant submission expectations for Blazer Graduate Research Fellows.</li> <li>6) Addition of the 4 hour/week time commitment for shadowing to the agreement form for that experience.</li> </ol>
Summer 2018	<ol style="list-style-type: none"> <li>1) Removed references to the <i>Graduate School Handbook</i>, which never existed with this title. Updated related material on steps toward the master's and dissertation to refer to the <i>Graduate Catalog</i>, and updated section on policies and added links to those available on the UAB website.</li> <li>2) Updated links to the Graduate School website following its update on 7/13/2018.</li> </ol>

Fall 2018	1) Add reference to required NSF GRFP and diversity training.
Spring 2019	1) Revise reference to the reprint/preprint option to mention that theses and dissertations submitted in this format can include manuscripts in preparation for submission to a named journal. 2) Note that one month's notice to the Department of Psychology chair and the Program Director is required of students who wish to be nominated for grants or scholarships that limit applications to one per department.
July 2019	Added section on tracking hours after internship applications are submitted to the appendix on special considerations for internship applicants and interns.
August-September 2019	1) Added explicit statement that thesis and dissertation defenses should not be scheduled during MPCC meetings. 2) Updated <i>Appendix D Considerations and Instructions for Internship Applicants and Interns</i> 3) Added <i>Appendix F: Learning Outcomes, Measures and Targets for Institutional Accreditation</i> 4) Greatly reduced <i>Appendix C: Getting Started with Logging Clinical Hours and Activities</i> . Most of the information that previously appeared in this appendix has been moved to PractiTrack's online help. 5) Multiple minor changes to avoid redundancy, improve clarity and eliminate typos.
October, 2019	Clarification in <i>Appendix D</i> regarding what hours to include in answering the AAPI question about anticipated practicum experiences.
November, 2019	1) Added PY 741 Child and Adolescent Psychopathology and Treatment to the list of courses that may be taken to satisfy the specialization course work requirement. 2) Expanded the text on diversity training to accommodate the new training provided in Fall of Year 1.
March, 2020	Added mention of the \$50 AFD fee wherever the AFD is mentioned.
September, 2020	1) Updated internship appendix for new AAPI 2) Added requirement for new non-clinical diversity course
October, 2020	1) Further specified information that the student should supply when requesting Ad Hoc Graduate Faculty Status for an individual to serve on the student's thesis or dissertation committee. 2) Statement on Professional Licensure added under Miscellaneous Policies.
November, 2020	1) Add encouragement to internship applicants to focus on acquisition of additional skills and competencies when completing the Anticipated Practicum Experiences section of the AAPI. 2) Clarify, in Table 2, that PY 779 has special registration instructions.
December, 2020	Updated the description of the Annual Review process.
March, 2021	1) Minor revision to diversity requirements section to clarify that the listed diversity dimensions is intended as examples and are not all-inclusive. 2) Changed AFD fee from \$50 to \$60.
April 2021	Add specific guidance for students whose internships end shortly after the August graduation date.
October 2021	Update requirements and course plan tables to remove reference to PY 700.
February 2022	Removed gender-binary language throughout.

April 2022	<ol style="list-style-type: none"> <li>1) Further gender-binary language removed.</li> <li>2) Advice added to the section on funding for students who would like to discuss the application process with other students who have been successful in obtaining individual predoctoral fellowships (e.g., F31, NSF GRFP, and APF mechanisms), or are interested in viewing successful grant applications.</li> <li>3) Added registration requirements for the summer prior to internship or during which internship begins.</li> </ol>
June 2022	Clarify and update steps for completion of the thesis and dissertation, including guidance concerning the structure of public thesis and dissertation defense meetings.
July 2022	<p>Move PY 760 Interviewing and Behavioral Observation to Spring of Year 1.</p> <p>Clarify administrative steps related to predoctoral grant submission.</p>
September 2022	<ol style="list-style-type: none"> <li>1) Updated supervision intensity requirement for the initial psychotherapy practicum for consistency with program policy as indicated on the practicum agreement and evaluation forms.</li> <li>2) Updated relevant section to allow students to apply to Birmingham internships</li> </ol>
October 2022	Update appendix D to alert rising interns to termination of their access to the UABMC e-mail addresses and the IMPACT electronic health records system.
November 2022	Eliminated threatening language regarding program probation and dismissal in defining Inadequate Progress. Existing procedures are in place to ensure that mentors, GAC committees, and the DCT are aware of students who are not making adequate progress and taking appropriate steps, based on individual circumstances, to remediate the situation.



## **Appendix B: Department of Psychology Policies on Tuition and Stipend Guarantees**

### **Implementing Policy for the Stipend Guarantee**

1. Each year the student, their Graduate Program Director, and the Graduate Program Manager make good faith efforts to find support for the student's stipend. Typically this stipend is in the form of a research, clinical, or teaching assistantship. Specific procedures for this process are established by the program directors. Goals are:
  - a. to match each student with an assistantship that provides opportunities for professional development that are consistent with each student's level of training as well as their educational and career goals; and
  - b. to satisfy departmental needs for graduate assistants; and
  - c. to otherwise limit departmental financial commitments to student support.
2. Notwithstanding Point 1a, above, no student is guaranteed the assistantship of their choice, and in a given year the student may only be offered assistantships that they do not prefer. That is, the graduate programs aim to match students to assistantships based on training goals, but there is no guarantee that this match will be ideal in every case.
3. The Department's guarantee of an assistantship or other stipend support is terminated:
  - a. at the end of five years in residence. In general, students are expected to complete their doctoral degrees within five years of initial enrollment, excluding time for clinical internships (Medical / Clinical Psychology Program) and any leave of absence.
  - b. if the student is placed on probation by their graduate program (program probation) and the student does not take the required steps to return to good standing within two full academic terms.
  - c. if the student is dismissed from their graduate program for any reason. Policies regarding good academic standing, probation, and dismissal are maintained on the Graduate School's website, and program-level policies may also apply.
  - d. Graduate program directors and the graduate program manager work together to enforce these termination provisions.
4. Students for whom the support guarantee is terminated may receive an assistantship or other stipend, but that support is not guaranteed by the Department of Psychology.

### **Implementing Policy for the Tuition Scholarship Guarantee**

This policy aims to ensure that students can take courses at the optimal point in their graduate course sequence to meet program requirements and obtain knowledge and skills that are foundational to their training objectives, while reducing "excess" enrollments that unnecessarily increase tuition costs to the department.

1. All course registrations must be approved by the student's graduate program director.
  - a. Especially for the first 1-2 years in the program, directors will distribute guidelines for required and elective courses that are consistent with program and Graduate School requirements, and the class schedule. Students who enroll in courses within those guidelines would then be assumed to have received the program director's approval.
  - b. In addition or instead of Point 1a, the Program Director may require students in their programs to meet with them, or the program manager, for approval of course registrations or to submit justification for specific enrollment requests.
  - c. In general, registration at the level required for full-time status can be approved by a program director or by the program manager based on guidelines from a program director. Registrations above this level are approved in consultation with the department chair.
2. The program director may require a student to alter their registration to reduce the financial burden on the department, as long as such steps do not materially delay the student's projected time to completion of the master's degree (where applicable) or doctorate. Such steps may include, for example, delaying a required course that is not foundational to the student's research and training goals, or reducing research or clinical practicum credits without altering the student's level of engagement in clinical training or research.
3. A student who withdraws from a class after the tuition charges have been paid will be personally responsible for paying for the equivalent number of semester hours in the subsequent term. This penalty may be waived by the student's program director for good cause, which must be documented in writing and copied to the department chair. Waivers should be based on clear indication that the withdrawal was due to unexpected factors beyond the student's control, or that it does not ultimately increase the tuition burden on the department.
4. The program manager will assist the program directors in monitoring registrations for compliance with the above provisions of this section of the policy.
5. Suspension and termination of the tuition scholarship:
  - a. Students placed on academic probation by the Graduate School or their graduate program shall have their tuition scholarship suspended for at least one term. The suspension will apply beginning with the next term for which tuition has not yet been paid by the department.
  - b. The tuition scholarship will be suspended for a second term if a student on probation fails to return to good standing (i.e., resolve the reasons for the probation) within one term. In the case of program probation, the reasons for the probation and specific steps required to resolve it must be provided to the student in writing at the time the probation takes effect. A copy of this letter should be placed in the student's file.
  - c. The tuition scholarship will be terminated if a student on probation fails to return to good academic standing within two terms.
  - d. The tuition scholarship is terminated at the end of five years in residence. In general, students are expected to complete their doctoral degrees within five years of initial enrollment, excluding time for clinical internships (Medical / Clinical Psychology Program) and any leave of absence.

- e. The tuition scholarship is terminated if the student is dismissed from their graduate program for any reason. Policies regarding good academic standing, academic probation, and dismissal are maintained on the Graduate School's website, and program-level policies may also apply.
  - f. Graduate program directors and the graduate program manager work together to enforce these suspension and termination provisions.
6. This policy does not affect tuition payments for medical / clinical psychology students while on clinical internships. Such tuition has been paid by the Provost's office by long-standing arrangement.

## Appendix C: Getting Started with Logging Clinical Hours and Activities

The Medical/Clinical Psychology Doctoral program uses a locally-developed Microsoft Windows® application called “PractiTrack” to track student’s practicum hours and related activities. This software also generates *Practicum Agreement and Training Plan* forms, *Practicum Verification and Evaluation* forms, and a summary of practicum experiences (*AAPL Preview*) for use in advising and preparation of internship applications. A standardized tracking process is used for three reasons:

1. To help keep students’ activity logging current and verified by supervisors so that they do not need to try to recover it months or years later when they are preparing to apply for internships,
2. So that advisors (e.g., the GAC) can monitor individual students’ clinical progress and readiness for internship based on accurate data.
3. To track clinical activities of students for program evaluation and quality improvement purposes.

A complete installation package (“zip” file) for PractiTrack is provided on the program’s private (Canvas) website. The zip file contains the program itself and required support files. This appendix is limited to brief instructions for installing and running PractiTrack. The program includes documentation and context-sensitive help that describes use of the program and the principles and guidelines that students should follow for logging clinical activities.

### *Installing PractiTrack*

1. Log onto the Medical/Clinical Psychology “course” in Canvas, locate the PractiTrack module, click on PractiTrack.zip, ignore the warning message, click on “Download PractiTrack.zip” and open it with Windows Explorer.
2. Click on Extract all files. You will be asked to indicate the folder to which you want to extract the files. This will be your PractiTrack “root” folder and would reasonably be named “PractiTrack”. Good choices for the location of this folder are:
  - a. Your Documents folder on your computer’s permanent disk drive. If you plan to always use the same computer to maintain your log of practicum activities, this is a good choice.
  - b. A flash (a.k.a. USB or thumb) drive that plugs into a USB port. If you plan to run PractiTrack on multiple computers (e.g., at various practicum or research sites) then this is a good choice. **Be aware of the risk, however, that your flash drive could be lost, stolen or damaged.** At a minimum, any flash drive used for this purpose should be encrypted (e.g., with Bitlocker<sup>3</sup>), and a plan should be developed for frequent backups to minimize the impact of data loss.

Verify the driver letter and folder name and then click on Extract.

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<sup>3</sup> Note that Bitlocker encryption is a precaution that’s suitable for PractiTrack data because it contains no PHI. If you are considering using a flash drive for patient data be sure to discuss this with your supervisor *before* doing so. Some sites disallow this altogether, while others require a more secure flash drive (e.g., Ironkey®).

3. If you are updating an existing installation, you will receive multiple queries about whether to replace folders and files.
  - a. Folders: You can safely select “Yes” on any “Confirm Folder Replace” dialog. This does not actually replace any folders, but rather merges them such that new files being downloaded will be added but no existing files will be deleted or replaced without your specific permission.
  - b. Files: Click on “Copy and Replace” for each file *with the exception of **Practicum Calculator.xlsx***. If you are maintaining a record of practica in this Excel file then “Copy and Replace” will overwrite it. In this case you will likely want to select “Do not copy”.
  - c. Although a program update will NOT overwrite your data file (PT\_Lastname\_Firstname.txt), it’s always a good idea to make a backup (or better yet upload your data to the DCT) before you update.

### ***Running PractiTrack – General Considerations***

1. Unlike many Windows programs you do not have to actually “install” PractiTrack before you run it. The program is extracted along with its support files and is then ready to run.
2. The program itself is in the Program subfolder of the PractiTrack root folder. If you are running the program from your computer’s permanent disk drive you may want to create a shortcut on your desktop. If you are running from a flash drive you can start the program by double clicking on the PractiTrack batch file in the PractiTrack root folder.
3. PractiTrack appears to work fine on a Mac set up to run Windows on a virtual machine or in a separate partition set up with Boot Camp. You will need copies of Windows and Microsoft Office to set this up. These are likely to be available to students for reduced costs.
4. Note that PractiTrack does not automatically access any central server or website. When you log activities they are stored in your data file (PT\_Lastname\_Firstname.txt) in the PractiTrack root folder to which you extracted the program from Canvas. If you extract the program and run it from a different location then you will have multiple inconsistent copies of this file that will be difficult to combine.
5. You can access the *PractiTrack Quickstart Guide* from the Other Tools menu or directly from the PractiTrack\Documents folder. Help! buttons are available on many menus. Contact Dr. Cook if you have questions or encounter problems.
6. The current version of the program has an expiration date, to ensure that users do not continue to use older versions that lack new features or have problems that have since been corrected. If you encounter problems with the software then the first step is to ensure that you are running the current version. Compare the Build # on Canvas with the Build # on the Main Menu. Higher numbers refer to more recent versions.

## Appendix D: Considerations and Instructions for Internship Applicants and Interns

This appendix addresses issues specifically related to application for, transition to, and enrollment and health insurance during the pre-doctoral internship. Certain graduation-related issues are also covered.

### 1. PRE-APPLICATION STEPS

- a. Read carefully the section on **Internship Readiness** that appears in the body of this handbook. The material presented in this appendix is intended to provide more “nuts-and-bolts” directions for students who have already been approved to apply.
- b. If you’ve not done so already you should join the [APPIC Match News listserv](#). To subscribe, send a blank e-mail message to the following address: [subscribe-match-news@lyris.appic.org](mailto:subscribe-match-news@lyris.appic.org). APPIC = Association of Professional Psychology Internship Centers.
- c. An [Internship Preparation Seminar](#) is offered every year in August through early November. Goals are to organize application steps and provide advice through the application process. Contact the DCT if you have not received information about meetings of the seminar by July 1. Typically this seminar meets weekly on Fridays. Participation is optional but highly recommended.
- d. [Incompletes](#): You will need to submit official transcripts. If you have a pending Incomplete from summer you should request the associated evaluation ASAP and then remind your supervisor or mentor with appropriate but increasing frequency so you can obtain a transcript that is free of such blemishes. You may also need to remind the DCT to change the grade once the evaluations are received and submitted.
- e. [PractiTrack data](#): Practicum hour and activity data should be up-to-date at the end of the summer term and prior to requesting approval to apply. Here are a few things to check:
  - i. All or nearly all of your past clinical activities in PractiTrack should have been verified by the time you receive and process your summer verification / evaluation forms. This information is provided on the Supervisor Dashboard. You can request verifications of past activities by going through the usual steps to create a verification/evaluation form, but instead of selecting a term select the option for “No Evaluation – Verification Only”. Be sure to put returned and signed verification files in your Pending folder so they are applied to your data and filed correctly. The hope, of course, is that you’ve been keeping up with this so you will need very few or no verifications at this point.
  - ii. Run the Validity Check tool (in the Other Tools menu). You’ll see a note if there were multiple integrative reports for the same patient. This can be accurate or it can reflect a data entry error, especially when the two dates are close. Two reports that are based on the same data sources should not be logged separately – delete one of them using the Activity Editor.
- f. [Review your AAPI Preview](#). You will be warned of any of the following issues that apply to your data:
  - i. [Non-standard test names](#). These can occur for various reasons, including the possibility that the name of a test was changed in the program since you logged it. That’s not done capriciously but is sometimes necessary to rationalize distinctions among related versions and forms. If you click on the drop-down box it will show you a list of current standard names that are similar to the name of the test that you logged. Standard test names are important

because each test is classified (Symptom checklists, Common neuropsych measures, etc.) for the preview. Note: If verification for the test is pending, use the “Skip to next...” button and fix this later, after the verification is processed. Verification looks for exact text matches.

- ii. Practicum/Supervisor Inconsistency. Prior to summer 2019 PractiTrack would allow you to log any practicum with any supervisor, and sometimes incorrect choices were made. Another option is that the name of the practicum you selected was reasonable but terminology was non-specific (e.g., “Sparks” practica always referred to Civitan-Sparks Clinics but it’s not surprising that students sometimes used those practicum names for the practica in the Sparks Building.) Select the supervisor in the left dropdown box and then the right dropdown box will display the practica that are appropriate for that supervisor. “Inactive” practica are simply those that are no longer appropriate for the supervisor but may have been appropriate in the past.
  - iii. Research testing for which the age of the individual who was tested was not specified. This is a warning that will send you to a tool on the Other Tools menu.
- g. Review your hours and activities – supplement to discussions in the internship prep seminar.
- i. The Practicum Settings table in the AAPI Preview combines information about categories (which you’ll enter in the AAPI online) and sites (which you won’t). The site information is provided because some practica can reasonably be placed in more than one category. APPIC’s philosophy is that when a setting can reasonably be categorized in more than one way you are welcome to classify in the way that presents your experience in the best light. If you find a site that you believe to be misclassified for most students then please inform the DCT.
  - ii. You can also reclassify some activities based on the principle described under “Resolving Classification Dilemmas” in PractiTrack’s context-sensitive help. For example, test feedback can be classified as assessment but in some circumstances might also be provided in the context of therapy or another intervention. PractiTrack provides a limited mechanism for retrospectively reclassifying hours, using the **Edit** button the the activity editor (see **Other Tools**). Otherwise the DCT can handle such reclassifications if you upload your data in September or early October and concurrently indicate what changes should be made, or you are free to make these adjustments later as you complete your AAPI Online.
  - iii. Telehealth issues: The AAPI draws a clear line between intervention and assessment conducted by 2-way interactive videoconferencing and activities conducted by telephone (audio connection only). In general PractiTrack follows the AAPI rules by combining face-to-face and videoconferencing hours within each category (e.g., individual therapy) and compiling telephone/audio-only activities separately so you should be able to just copy your hours from the AAPI Preview to the online form. **Before beginning to enter your hours on the website, be sure that you have correctly logged each intervention, assessment, and supervision activity correctly based, on whether it involved face-to-face, videoconferencing, or audio-only interaction.** You can use the **Edit** button on the activity editor to change or remove the telehealth designations for any activity. Note that tracking telehealth hours in correct categories is important not only for your internship application, but also because licensure processes in some states may also require categorization of pre-internship clinical services based on the medium by which they were delivered, but will not be bound by APPIC’s policies.
  - iv. It may be helpful in checking your hours to generate a **spreadsheet** and sort it (for example) by Supervisor, (activity) Type, and Date. You can then scan down the date-sorted entries in

each major category for each supervisor and determine quickly what activities you have logged and any telehealth designations (\*V for video, \*A for audio, blank for F2F) that you have used.

- h. ***Do not leave clean-up of your PractiTrack data or entering your information into the AAPI until the last minute, in case problems are found that need to be addressed. Plan to submit your description of your doctoral training and practicum experiences to the DCT no later than October 15<sup>th</sup>.***

## 2. ACCESSING THE AAPI (APPLICATION FOR APPIC PSYCHOLOGY INTERNSHIPS) ONLINE

- a. Access to the AAPI Online typically begins in July, and is announced on the APPIC Match News listserv. Most of the process of completing the application is self-explanatory and user-friendly. Below you'll find some "tips" on answering specific questions as a student in our program.
- b. You can access the application through the APPIC website (e.g., search for "APPIC AAPI"). That site provides access to a number of links that may be useful for you to review. The current direct link to the application is: <https://aapicas.liaisoncas.com/applicant-ux/#/login>.
- c. The first time you go to the AAPI Online you will need to create an account so that you can sign in.
- d. Once you are signed in you will see four large buttons: Personal Information, Academic History, Supporting Information, and Program Materials, described below:
- e. Personal Information is generally straightforward. Be sure to
  - i. Read each of the sections of the Release Statement carefully as they describe important commitments that you are making in submitting your AAPI, as well as various constraints on internships and your graduate program that it's important for you to understand.
  - ii. Provide Contact Information that will work for you throughout the internship application season (roughly November through February).
  - iii. If you cannot answer 'No' to any of the Professional Conduct questions (on the Other Information page) you should discuss that situation with your DCT.
  - iv. Note that you can defer registration for the Match but read the instructions carefully on the Applicant Match Number page to ensure that you don't miss the deadline(!).
- f. Academic History
  - i. For Colleges & Universities Attended includes all institutions attended. Review all instructions regarding transcripts carefully, including those that are accessed via the "Sending Official Transcripts" link.
  - ii. For Additional Graduate Program Info, indicate
    - 1) Current Graduate Program Information:

Department Name:	"Psychology"
College Name:	"College of Arts and Sciences"
Designated subfield:	"Clinical"
Degree:	"Ph.D."
    - 2) Doctoral Training Information: self-explanatory
    - 3) Dissertation/Doctoral Research Advisor: self-explanatory.
    - 4) Director of Clinical Training Information: "Edwin W. Cook III, PhD"
- g. Supporting Information includes
  - i. Psychology Training Experiences (see below).



- ii. Presentations and Publications (follow the “Applicant Help Center” link for further information)
  - iii. Licenses and Certifications (most students won’t have any of these to report).
- h. Program Materials is where you will initially select programs. You will return to this page to select tracks, upload materials, pay fees and submit applications.

### 3. ENTERING PSYCHOLOGY TRAINING EXPERIENCES

- a. The AAPI Preview should provide most of the records that you need for this section.
- b. Beginning in 2020, applicants must enter their practicum experiences through Time2Track (T2T), which is a web-based application for tracking clinical activities.
  - i. Just to allay fears: You will not need to re-enter individual experiences into Time2Track. In general you will only need to enter summary information, which appears on your PractiTrack AAPI Preview. Based on prior students’ experience, that process usually takes about 2-3 hours, depending on the number of different tests you have administered and whether you kept track of patients and activities in various “Other” categories when prompted.
  - ii. To begin this process you will need to set up a Time2Track account, which is independent of your AAPI Online account, so you will need to keep track of both usernames and passwords.
  - iii. After accessing the Psychology Training Experiences page, click on Connect. The first time you do this you will need to set up a free trial. For School or Organization, enter UNIVERSITY OF ALABAMA AT BIRMINGHAM (*not* the Psychiatry entry, which is for the internship).
  - iv. Once you are logged onto Time2Track, click on “AAPI” at the top of the page. (You will have no reason to access the Activities, Assessments, or Reports tabs – those are for entering individual practicum activities, which you have already done through PractiTrack.)
  - v. Although Time2Track is a fee-based subscription service, you should never have to pay to use Time2Track to enter hours for the AAPI. However, some students (and your DCT) have been asked to pay after the 30-day free trial expires, and *sometimes* it has worked to ignore that message and simply click on “AAPI” at the top of the page. Contact their help desk for further assistance.
  - vi. The AAPI tab will reveal four tabs on a second line: *Dashboard, Summary of Practicum Experiences, Practicum Hours, and Summary of Doctoral Training*. You will need to use all four of these tabs to enter information for your internship application. The names and ordering of these tabs aren’t altogether logical; the sequence described in Sections **3c-3f**, below, is recommended.
  - vii. You are strongly encouraged to read the information at the [View instructions for this section](#) link that appears in the upper right corner of each tab. It may help to review the video.
    - 1) DISREGARD the section titled Process for Trainees with Existing Time2Track Accounts because you didn’t use T2T to track your activities
    - 2) DO attend to the information at the link under the heading Process for Trainees New to Time2Track. The table of contents for this section of the help facility appears to the right.
    - 3) The FAQ may also be helpful, but in all cases recognize that some statements apply to students who have been using T2T to track hours and others apply to students (like you) who are only using the website to enter hours for the AAPI.

- 4) Additional help is available on various pages of this website and you are encouraged to review this material to determine whether it applies to you.
  - 5) If there are conflicts between any instructions on T2T pages (including help pages) and in instructions that appear in this handbook, please notify the DCT as soon as possible so these discrepancies can be resolved.
- c. Start with the **Practicum Hours tab**, which is where you will enter hours and counts of patients and groups from your AAPI Preview. All other information from your AAPI Preview will be entered on the Summary of Practicum Experiences tab. Most of the information on the Practicum Hours tab will be familiar or self-explanatory. Here are a few points that may help to clarify:
- i. If you completed all of your clinical training in the Medical/Clinical Psychology doctoral program at UAB you will only use the **Doctoral** columns. Hours and activities that you accrued while earning your master's degree in our program should be counted in these Doctoral columns as well.
  - ii. Use the **Terminal Master's** columns *only* if you obtained clinical practicum experiences in a terminal master's program before coming to UAB.
  - iii. You can pad hours to reflect additional activities you expect to complete by the end of October of the year in which you are applying for internship. (Note, this may change in future years.) Across all categories such padding should increase the hours that you report in the four major categories (intervention, assessment, supervision and support) by only a very small fraction (usually < 2%).
  - iv. As noted above, the AAPI (and therefore the AAPI Preview in PractiTrack) makes no distinction between intervention and assessment activities that occurred in person or via videoconferencing. These formats are combined to obtain the hour sums that you can enter as "FACE-TO-FACE" on the form.
    - 1) There is, however, a separate category for tabulating hours of telephone-based interventions, and the number of different individuals for whom you provided phone-based interventions. True on the AAPI so also on the AAPI Preview.
    - 2) Ditto for Telephone-Based Assessments. Enter hours from the AAPI Preview.
    - 3) At this time, telephone-based *supervision* is not tabulated separately from supervision conducted face-to-face or via videoconferencing. This was a COVID-19-related modification, and you may find conflicting instructions if you look online. In past years telephone-based supervision did not "count" on the AAPI, and in the future, and in other contexts such as licensure, phone-based supervision may also be excluded. PractiTrack's current AAPI Preview groups together all supervision formats. If necessary, supervision that was not face-to-face can be separated out later either through program modifications or using the spreadsheet.
  - v. Other Supervision corresponds to supervision by those we refer to as "supervisors in training": advanced graduate students, interns, and unlicensed post-docs.
  - vi. Many categories of Support hours are available on the Practicum Hours tab, but any breakdown of hours that you enter into T2T will not be reported to internships. Fill in your total support hours under "Other" support on this page. You will then be able to describe the breakdown of your support activities on the Summary of Practicum Experiences tab.

- vii. The Treatment Settings section on PractiTrack's AAPI Preview provides the summary information on both intervention and assessment hours that is requested. A breakdown by supervisor and practicum is provided (in blue) to help you move hours that may be appropriately classified in multiple ways or might even be misclassified based on specific characteristics of your practica.
    - 1) The breakdown of Other treatment settings is in gray because you'll have an opportunity to describe that breakdown on the Summary of Practicum Experiences tab.
    - 2) Sparks Center LEND/UCEDD leadership recommends that their setting be classified as Other for the AAPI, and PractiTrack follows this guidance. This provides an opportunity for students to highlight the national recognition that this site has earned. There may be other settings for which this reclassification is also appropriate. Discuss with internship prep seminar leaders, site supervisors, and/or the DCT for guidance.
    - 3) If you move hours, remember to delete those hours from their original location on the form. as you add them to a new location
  - viii. The Patient Demographics section asks for counts that you should be able to copy directly from your AAPI Preview. Each of these sections have an Other category, on which you can elaborate on the next tab.
- d. On the **Summary of Practicum Experiences tab** you will find a series of links to sub-tabs that add or elaborate information about your practicum experiences. Following those links will allow you to proofread the hours and counts you entered on the Practicum Hours tab, explain some of your experiences (e.g., describe your group therapy and telephone-based intervention experience, and indicate what the various "Other" categories refer to), and enter your experience with specific tests. If you described experiences in the various Other categories when prompted by PractiTrack then your task will be easier at this point. Here are details:
- i. *Terminal Master's Information:* Enter requested information if applicable. Otherwise click "This section was left intentionally blank"
  - ii. *Intervention Experience:* You can check the intervention hours that you entered from your AAPI Preview on this page. There are also some text boxes for you to complete if applicable:
    - (a) If you tabulated hours for Other School Counseling interventions, Other Psychological Interventions, or Other Psychological Experience with Students/Organizations, you should describe those activities. If you already entered that information when prompted in PractiTrack then you should be able to just copy and paste from your AAPI Preview.
    - (b) For Telephone-Based Intervention Experience, there is a place for you to *specify the types of telephone-based intervention services you provided along with the respective hours of each type*. PractiTrack's AAPI Preview provides a relevant listing that you should be able to copy and paste into this box. Feel free to edit to turn this into nicer prose that does not look like it was written by a computer program.
    - (c) No instructions are provided for the "Comments" box at the bottom of this page. Anything you enter here will become part of your AAPI that is provided to internships. You may wish to discuss potential entries in this box with your DCT, internship prep seminar leaders, or GAC members.

- iii. *Psychological Assessment Experience:* Here again you can proofread, and there are some text boxes to complete if applicable:
  - (a) You should describe any telephone-based assessment experiences. PractiTrack provides a breakdown by type of assessment (psychodiagnostic / neuropsychological/ other) that you can copy and paste into this box, but some further description will be useful to those who are reviewing your application. You can use the spreadsheet function in PractiTrack to refresh your memory of the assessments that contributed to those telephone assessment hours.
  - (b) If you have hours in the “Other Psychological Assessment Experience”, you can explain them here.
- iv. *Adult Assessment Instruments and Child and Adolescent Assessment Instruments.* This is where you enter your testing experience from the AAPI Preview, and it is the most cumbersome part of entering your practicum experiences into Time2Track.
  - (a) To add an assessment (test), go to the bottom of the table and click on “+ Add a New Entry”. In the pop-up window click on “select an assessment”. You can scan down the list or use the search box. Typically the latter will be faster: just start typing the name of the test. If the test appears below the search box then it’s one of the few tests that’s built into Time2Track, and you can click on it to add it to your list. More often you’re likely to get a “No results match” error, in which case you’ll need to scan down the list for the correct category, find the last “test” in the category which is “Other”, and select that. You’ll then be able to enter the test name under “Specify Other”.
  - (b) In either case, add the counts from the 3 columns on the AAPI Preview (administered / scored, reports written with this measure, administered for research). No instructions are provided for the “Comments” box on this page – it’s up to you to decide whether you have any further information that you want to add about a particular test.
  - (c) Discrepant categorizations of tests between PractiTrack and the AAPI should be reported to the DCT.
- v. *Integrated Reports:* Simply copy your adult and child/adolescent report counts from your AAPI Preview.
- vi. *Supervision Received:* This will display the hours that you entered on the Practicum Hours page.
  - (a) If you were supervised by an advanced graduate student, intern or unlicensed post-doc in a vertical supervision arrangement, then those hours should appear under “Other Supervision”. You should indicate who provided that supervision in the “Optional Comments about Other Supervisors” box. Be sure to indicate that the trainee was supervised by a program-approved licensed clinical psychologist.
  - (b) Indicate the form of direct observation that you have received: review of an audio recording, review of a video recording, and/or live/direct observation. The latter will be true of most students, but in any case check all that apply.

vii. *Additional Information about Practicum Experiences:* This is a miscellaneous page:

- (a) The practicum settings and patient demographics information you entered on the Practicum Hours page is reported here. If you listed hours or patients in any of the “Other” categories then you can explain those hours/patients here. Examples are described below.
- (b) PractiTrack sorts Sparks practica into the “Other” category. You might want to mention that those hours were accrued in a UCEDD/LEND setting, if that’s likely to be relevant to your internship sites.
- (c) If you recorded Other/Unknown for the sexual orientation of a patient or client because the individual’s sexual orientation was unknown, you can explain that. Students with large number of child or assessment patients, for whom sexual orientation may not be relevant or known, can note that in their explanation. If you’re unsure you can sort the spreadsheet in PractiTrack on the Orientation column and look at the ages of individuals with Orientation=N (other/unknown).
- (d) PractiTrack will automatically tabulate in the Other Disability category anyone you entered as SMI/SED who was under age 18. In the associated text box these individuals will be listed as SED (Serious Emotional Disturbance). This is done because the AAPI is missing an SED category.
- (e) You are asked to describe any psychotherapy groups you have led or co-led. PractiTrack compiles the requested information from your group intervention entries (whether originally classified as Group Therapy or not). You can copy and paste that information from the AAPI Preview but you should definitely revise to provide a narrative description that integrates the data.
- (f) You are asked to rank order components of your primary theoretical orientation. These are your choices; consult with your various advisors if you have questions about how to answer this question.
- (g) You can also decide whether to include Non-Practicum Clinical Work Experience. This could include clinically-relevant employment prior to attending graduate school, or clinically-relevant work that was not represented by activities reported in other parts of the application. Do not report any activities here that were reported among your practicum experiences.

viii. *Support Activities:* Again, this section reports hours that you entered on the Practicum Hours page, and provides a place for you to explain them. You can copy and paste this information from the AAPI Preview, but you are encouraged to create a more readable narrative than PractiTrack provides. Make sure that your Support Hours (e.g., chart review, report writing) make sense in the context of your other activities.

e. The **Summary of Doctoral Training** tab is where you enter the following information:

- i. *Doctoral Program Information:* Progress you have made in completing program benchmarks including your dissertation.

Doctoral Program Information	Status	Date Completed or Expected	Required to participate in match?	Required to attend an internship?
Did you complete your academic Coursework?	Completed	Provide month/year	Yes	Yes
Have you successfully completed your program's comprehensive examinations?	Completed	The dissertation proposal serves this purpose in our program, so answer accordingly	Yes	Yes
Master Thesis:	Completed	Date of master's thesis approval	Yes	Yes
What is the current status of your dissertation/doctoral research project?	Status	Date Completed or Expected	Required to participate in match?	Required to attend an internship?
Proposal Approved	Completed	Provide month and year	Yes	Yes
Data Collected	Answer as appropriate	Answer Yes to both questions, reflecting program requirements, unless you were granted a waiver. In that case answer No to both questions. Don't answer Yes for either question if you haven't completed data collection as that suggests that you might renege on an offer if a problem with your data collection arises later on.		
Data Analyzed		No	No	
Final Defense		No	No	

- ii. *Anticipated Practicum Experience:* Describe the additional experiences that you will accrue between November 1<sup>st</sup> and the start of internship. The modal start date for internships is approximately July 1, so you are describing the additional activities you will complete and estimating the hours you will accrue between November 1<sup>st</sup> and approximately June 15<sup>th</sup>.

- (a) If you are considering accruing *no* hours after you submit your application, please discuss that decision with internship prep seminar leaders, your GAC, and the DCT. Some faculty have advised against going for approximately 8 months or more with no clinical activity prior to beginning the internship, so some individuals on internship admissions committees may have similar concerns.
- (b) The specific categories of hours to include as Number of Hours Anticipated are not specified, but you are encouraged to include the sum of patient contact, supervision, and support hours. Your Description of Anticipated Practicum Experience should break out (at least) intervention, assessment, supervision and support, and could include more specific categories such as individual therapy, group therapy, and/or neuropsychological

assessment. The distribution should make sense; for example, you should have an appropriate number of supervision hours for your contact hours, and you should include support hours for session prep/review, test scoring, and/or report writing depending on the patient care activities in which you will be involved.

(c) This is an opportunity to demonstrate good judgement in planning additional practica that take advantage of remaining training opportunities at UAB while prioritizing completion of your dissertation so that you will be optimally positioned to take advantage of training opportunities while you are on internship. It may be helpful to reference dissertation plans explicitly when you describe your additional practicum plans. Note that some internships offer opportunities to participate in research that are restricted to students who have already defended their dissertations. There are also potential problems with promising too many additional hours:

- 1) If your additional hours are high compared to your existing hours they will look unreasonable, improbable, or unwise, especially if you've not yet defended your dissertation. For example, if you've accrued 800 contact hours in 3 years then it's unlikely that you'll accrue another 300 contact hours in 8 months, especially given that you will be interviewing for internships and completing your dissertation over the same period of time.
- 2) Current accreditation policy requires us to communicate with your internship at the beginning of the internship year, and part of that communication will be the number of additional hours that you accrued in major categories beyond what you reported on your AAPI. No one is likely to check this report against your plans, but if they do, you don't want it to look like you were less than honest.

(d) All this being said, this question is not all about hours. It is unlikely that internship sites will care about how many hours you anticipate nearly as much as they will be interested in your plans for any additional practicum experiences that address gaps in your training, and in which you will acquire new knowledge and competencies or enhance those that you already have. That progress will also reflect well on you when your progress is updated and communicated to the internship at the beginning of your internship year.

iii. *Doctoral Program Information - Contact Information for Academic DCT/TD*: self-explanatory.

f. **Finally, after all of your other information is entered, use the Dashboard tab to submit this information to your DCT for verification. Please submit those requests no later than October 15<sup>th</sup>.**

- i. Use the *Finalize and Submit Summary of Doctoral Training* button under Step 1 for this purpose. This will route your summary to me.
- ii. When you submit your AAPI to me, please also upload your PractiTrack data file. Your DCT will be running PractiTrack and reviewing your AAPI Preview and validity checks for:
  - (a) Hours and activities verified through the end of summer term, with rare exceptions.
  - (b) Hours and activities updated through at least October 1<sup>st</sup> so in most cases the summed hours you report in your AAPI should be a close match to those that appear on your AAPI Preview. The only sources of discrepancies should be the additional hours you project for the month of October or shifts between intervention and assessment as described

above. Other anticipated discrepancies should be discussed with the DCT in September, not in October.

(c) No other major issues revealed by validity checks.

- iii. I'll also review other parts of your AAPI that are forwarded to me as part of the Summary of Doctoral Training, such as answers to the progress questions and anticipated hours. I will either approve your submission or get back to you promptly with any questions or requests for changes. It is rare that students are not asked or advised to make changes.

#### 4. REFERENCES AND THE DCT LETTER:

##### a. References

- i. There is an online Standardized Reference Form (SRF) form that is new for the 2022-2023 application cycle. All letter writers will need to use the new form; none will be able to submit a traditional letter of recommendation as they may have done in prior years.
- (a) Because the SRF is new, and also in responses to some concerns expressed in prior years, a document has been prepared to instruct reference-writers on procedures and protocol. This document – *2022 Internship reference instructions with blank form* – is available on Canvas. Please download it, read it, and send it to each of your reference-writers.
- (b) As noted in the document, letter writers should not ask you to answer the questions on the form for them. This is potentially a fine line: It is reasonable for a letter writer to ask you for reminders of your activities with them (which, for clinical supervisors, should be on the agreements), and to ask you for your assessment of your strengths and the competencies you are aiming to develop further on internship. It's fine for you to remind them of activities with them in which you believe you excelled, and/or to send them copies of your evaluations. If requests from letter writers appear to go beyond these general guidelines, please inform the DCT.
- (c) The document also asks each of your reference writers to send the DCT a copy of their **Standardized Reference Form (SRF) PDF by October 21<sup>st</sup>**. Please emphasize this instruction to them. October 21<sup>st</sup> is a good deadline to distribute to your reference-writers for your purposes as well so that those references are in place when you submit your applications to your sites.
- ii. Other considerations related to references and the selection of reference-writers:
- (a) Faculty who have written comments on your evaluations may be better positioned to write a reference for you. Those comments tell you what they're likely to say about you. If you are unsure of their opinion that's an entirely appropriate topic for discussion.
- (b) Consider seniority and affiliations, at least in the aggregate. Reference writers may describe their own qualifications and experience as context for commenting on your strengths, competencies, and qualifications, so it probably helps to have at least some reference writers who can point to their own substantial experience (e.g., by describing you as one of the best students they have trained over the past 20 years, rather than the past year). Also, if you are applying to sites with a particular emphasis then where appropriate you might encourage a reference writer with strong credentials in that area to mention those qualifications.



- (c) Choice of reference writers should make sense in terms of your practicum experiences: If you received a substantial amount of your experience in one setting then the absence of a reference from someone from that setting might raise concerns. If this is likely to happen due to constraints on the number of references then inform the DCT, who may be able to address this issue in their letter.
- b. **Your DCT is required to write a summary letter** for you that includes your major strengths and any areas that would benefit from further training and development during internship. It is in everyone's best interests for you to make this task as reasonable as possible.
  - i. As soon as you have firmed up your list of sites, and **no later than October 15<sup>th</sup>**, send that list to your DCT. Indicate the application deadline for each site.
  - ii. DCTs are asked to collect information about your training from "knowledgeable parties", which includes *you*. So **also no later than October 15<sup>th</sup>** please send your DCT the following:
    - (a) Summaries (in list form) of your self-assessed strengths and areas for further development. There should be reasonable correspondence between your self-assessed strengths and how you describe yourself in your cover letters or essays.
    - (b) Areas for further development should be your own honest self-appraisal but of course they should tilt toward things that can reasonably be addressed at the internship sites to which you are applying.
    - (c) If there's anything else you want the DCT to cover in the letter then please describe or arrange to discuss. Note that although you will tailor some parts of your application to different programs, the DCT letter becomes part of your standard application and so will be the same for all programs. If you are applying to two distinct types of sites then we should probably discuss.
    - (d) An up-to-date vita. Please make sure this is in good shape with citations in APA format. Your vita represents you, so make a good impression!
    - (e) Optionally, include drafts of final essays and a sample cover letter, all of which may help the DCT to highlight your strengths and present a consistent message to internship programs.
    - (f) A list of your letter-writers.

## 5. CONTINUED TRACKING OF ALL ACTIVITIES AND SUBMISSION OF EVALUATIONS THROUGH PRACTITRACK AFTER INTERNSHIP APPLICATIONS ARE SUBMITTED

All students are required to log practicum activities in all categories, including after they submit their internship applications, until they depart for their internships. There are several reasons for this requirement:

- a. For accreditation the program is required to track your practicum and other training activities until you depart for internship.
- b. During the internship year we are also required to maintain communication with your internship since that training is formally a part of your doctoral training. To facilitate that, and as noted above,

at the beginning of the internship year the DCT updates the internship site on the additional clinical practicum hours and activities that you have completed, and any progress that you've made in terms of your competencies.

- c. The program reports on the contributions of our students to the healthcare service mission of the university. This report is used as a basis for requesting funds used to support the program including student travel and additional training. Therefore we do not want to underestimate those contributions, which would occur if students stopped recording activities after they have submitted their internship applications.
- d. If you expect to pursue professional licensure at some point you will very likely be asked to document your pre-internship hours, and if so then your DCT will likely be asked to sign off on those hours as well. There's no basis for verifying hours beyond those reported on your internship application unless you continue to log those hours.

**6. TRANSITION DATES, PROCESSES AND NOTIFICATIONS AFTER AN INTERNSHIP PLACEMENT HAS BEEN SECURED:**

- a. As soon as you know them, send the following dates to the Graduate Programs Manager:
  - i. Termination date at UAB (last day you will be on-site and engaged in clinical work or research). This is the last day for which you will be paid.
  - ii. Official start and ending dates for your internship
- b. Be sure to communicate in a timely way with your research mentor and any clinical supervisors regarding relevant termination dates and any absences (e.g., trips to find housing) associated with transition to your internship site.
- c. Before you leave for internship, be sure that any outstanding research and clinical practicum evaluations have been submitted, along with a final updated clinical activity data log from PractiTrack.
- d. Note that access to both IMPACT and UABMC email will end on your UAB termination date so plan in advance to ensure that all IMPACT entries are complete and all contacts know to use your uab.edu address after that date. Any patients who might use your UABMC address should be provided with an alternative contact, to be determined in coordination with the corresponding clinical supervisors.

## 7. REGISTRATION:

- a. Registration for the summer PRIOR to internship: Please follow the instructions in this table:

Ending Date for UAB Funding	Trainees	TAs/RAs
Prior to the first day of the 10-week term	Do not register	Do not register
On or before July 4 <sup>th</sup>	2 credit hours	3 credit hours
After July 4 <sup>th</sup>	3 credit hours	5 credit hours
<p>Notes:</p> <ol style="list-style-type: none"><li>1. If you are registering for any hours and will be engaged in practicum after the 1<sup>st</sup> day of the 10-week term, then one of those hours should be PY 797 (clinical practicum). Otherwise register only for PY 799.</li><li>2. Excess registration required only to defer loan repayment or borrow additional funds will not be covered by the program or department. Contact the Financial Aid office if you need instructions or advice on loan-related requirements.</li><li>3. Evaluations are required for any and all practica and research hours for which you are registered, so I can give you a grade. They are due by the last day of finals period at the end of the summer. (Exception: If you defend your dissertation before this date then no evaluation is required.) If you will be gone and involved in your internship by the end of summer term you are strongly encouraged not to wait to request evaluations, but rather to generate and request practicum evaluations as soon as you complete your practicum, and research evaluations before you depart Birmingham for your internship.</li></ol>		

- b. Registration During Internship: For the Fall and Spring semesters, as well as the Summer term at the END of your internship, register for 9 hours of PY 790 Clinical Internship each term. There is no tuition associated with registering for these hours.
- c. Registration if Graduation is Delayed:
- i. You must be registered during the term in which you receive your degree. Typically, this will be summer of your internship year, you will already be registered for PY 790, and your degree will be officially awarded in August.
  - ii. Delays in this graduation schedule typically occur for one of two reasons:
    - (a) The student did not defend the dissertation, make all changes to the document that were required by the committee, and complete all other requirements in time to meet the Graduate School's deadlines. Please note that assembling the dissertation committee for a meeting can be much more challenging in the summer due to travel schedules, and all dissertation committee members are expected to be present at the dissertation defense unless they are permanently employed elsewhere (e.g., ad hoc experts in the subject field).
    - (b) The internship ends after the August graduation date. The program has very little flexibility here as this is an accreditation issue. If your internship ends within a week or two of summer graduation some accommodation may be possible if you can complete all required internship hours prior to graduation. If you are in this situation the following steps are recommended:
      - 1) Discuss the situation with your internship training director. Fall of the internship year is a reasonable time to raise this issue. Students have usually been able to work

out a plan to work sufficient extra hours or forego vacation to complete the internship by the August grad date. Be prepared to offer to work normal hours past graduation date, until the scheduled end of the internship, since sites usually count on their interns to continue until the next class of interns begins.

- 2) Send the DCT an e-mail that indicates that arrangement have been made for you to complete your internship requirements by graduation date, and copy the TD. The DCT will check back with the TD for confirmation. You should complete this step no later than the end of May.
  - 3) On the last internship day before graduation the TD should send confirmation to the DCT, indicating that you have completed your internship requirements.
- iii. If you do not graduate in August you will need to register again (typically for 1 credit hour of PY799) in the fall after your internship so you can graduate in December. Documentation of completion of degree requirements can be obtained from the program and/or Graduate School prior to the official graduation date if that is helpful for post-doctoral employment or fellowship purposes.

## **8. APPLICATION FOR DEGREE:**

- a. Applications for degree are submitted online. A link appears on the Graduate School online forms web page. There is a fee (\$60) that is not covered by your tuition scholarship.
- b. If you will defend your dissertation before leaving for internship, complete and submit your Application for Degree (AFD) at least two weeks before you submit your on-line dissertation approval forms.
- c. Even if you will be leaving for internship without completing your dissertation, you are still strongly advised to submit your AFD before you leave.
- d. Regardless of dissertation status, indicate August at the end of your internship year as your graduation month if your internship ends before the published graduation date; otherwise indicate that you will graduate during the subsequent December. Note that if you do not complete requirements in time to graduate during the month you specified then you will have to complete a new form and pay a reorder fee.

## **9. HEALTH INSURANCE:**

- a. If you currently have UAB student health insurance you will have paid your premiums through the end of the summer, which will generally cover your transition to internship.
- b. Because you will remain enrolled in a mandatory-insurance graduate program you will need to demonstrate that you will have health insurance while on internship. In most cases it is expected that you will obtain insurance through your internship or another source, although you will remain eligible for student health insurance at UAB. If you will not be taking the UAB insurance, you will need to complete a waiver form, which can be downloaded from <https://www.uab.edu/students/health/insurance-waivers> and submitted directly to Student Health. They will not process the form unless you include all details regarding your new insurance. Please complete this form as soon as your insurance covering the Fall term is established at your internship site.

- c. Note that a waiver is required every year in order to register for summer term, so expect a hold on summer registration during your internship year. This will clear once you submit the waiver form indicating your then-current insurance coverage.
- d. If you will not be graduating in August at the end of your internship year you may wish to contact Student Health Services regarding your individual circumstances and options.

#### **10. INTERACTIONS WITH THE PROGRAM DURING INTERNSHIP**

- a. We will need to communicate with you from time to time while you are on internship. For example, we will need to alert you when it's time to register each term and contact you when we need updated information for our annual reports to the university and to APA. To ensure the reliability of these communications, please send the Program Manager and the Program Director an e-mail address that you frequently monitor (e.g., a gmail address or the e-mail address that you are assigned at your internship), *but also continue to monitor your uab.edu address regularly throughout the year.*
- b. If you do not complete and defend your dissertation before leaving for internship then we will ask you to complete a research evaluation form with your mentor at the end of each term, up until the term in which your dissertation is defended.
- c. Near the end of the internship year we will send you an evaluation form to be completed by your internship training director or a supervisor who has had ample opportunity to observe and evaluate your work on internship. This is a special version of the evaluation form that we use for clinical practica.

## Appendix E. Training Goals and Associated Objectives, Knowledge and Competencies

### Goal #1: To train students who are thoroughly grounded in the science of psychology and its application to health and disease.

Associated Objectives	Associated Knowledge and Competencies
<ol style="list-style-type: none"> <li>Students possess knowledge of the history and foundations of scientific psychology and how psychology as a science and profession has progressed and developed over time.</li> <li>Students possess knowledge of biological influences on affect, cognition and behavior.</li> <li>Students possess knowledge of the lifespan development of human affect, cognition and behavior.</li> <li>Students possess knowledge of social influences on affect, cognition and behavior.</li> <li>Students possess knowledge of major conceptual models of disease and health and on major systems and process related to physical and mental health.</li> <li>Students possess knowledge of basic concepts of psychological measurement and their application to the assessment of cognition and personality.</li> </ol>	<p><u>Discipline-Specific Knowledge</u></p> <ul style="list-style-type: none"> <li>History and Systems of Psychology</li> <li>Affective Bases of Behavior</li> <li>Biological Bases of Behavior</li> <li>Cognitive Aspects of Behavior</li> <li>Developmental Bases of Behavior.</li> <li>Social Bases of Behavior</li> <li>Advanced Integrative Knowledge of Discipline-Specific Content Areas</li> <li>Psychometrics</li> </ul> <p><u>Profession-Wide Competencies</u></p> <ul style="list-style-type: none"> <li>Assessment</li> </ul> <p><u>Program-Specific Competencies</u></p> <ul style="list-style-type: none"> <li>Integration of medical health, mental health and behavior</li> </ul>

### Goal #2: To train students who are prepared to engage in high-quality practice of psychology at the entry level in collaborative and interdisciplinary professional health care contexts.

Associated Objectives	Associated Knowledge and Competencies
<p>In a range of medical and mental health contexts...</p> <ol style="list-style-type: none"> <li>Students understand major forms of psychopathology and their connection to basic biological, learning, cognitive, social and affective processes as well as individual differences in these processes.</li> <li>Students demonstrate knowledge and skills in the areas of psychological assessment.</li> <li>Students demonstrate knowledge and skills in selecting and implementing interventions.</li> <li>Students demonstrate knowledge and skills related to use of assessments and interventions that are applicable to the medical/health care environment.</li> <li>Students demonstrate attitudes and behaviors that are conducive to professional and therapeutic interactions with patients.</li> <li>Students demonstrate attitudes and behaviors that are conducive to professional interactions with colleagues and supervisors.</li> </ol>	<p><u>Discipline-Specific Knowledge</u></p> <ul style="list-style-type: none"> <li>History and Systems of Psychology</li> <li>Affective Bases of Behavior</li> <li>Biological Bases of Behavior</li> <li>Cognitive Aspects of Behavior</li> <li>Advanced Integrative Knowledge of Discipline-Specific Content Areas</li> </ul> <p><u>Profession-Wide Competencies</u></p> <ul style="list-style-type: none"> <li>Assessment</li> <li>Intervention</li> <li>Individual and Cultural Diversity</li> <li>Supervision</li> <li>Consultation and Interprofessional/Interdisciplinary Skills</li> </ul> <p><u>Program-Specific Competencies</u></p> <ul style="list-style-type: none"> <li>Integration of medical health, mental health and behavior</li> </ul>

**Goal #3: To train students who are prepared to conduct meaningful and high-quality research that contributes to understanding of significant psychological or medical disorders, their assessment, amelioration, or management.**

Associated Objectives	Associated Knowledge and Competencies
1. Students possess both general and domain-specific knowledge of research design	<u>Discipline-Specific Knowledge</u>
2. Students possess knowledge and skill necessary to conduct statistical analyses appropriately for most research designs in current use, as well as a foundation for understanding new statistical methods.	<ul style="list-style-type: none"> <li>• Research Methods</li> <li>• Quantitative Methods</li> </ul>
3. Students are familiar with major ethical and regulatory issues related to conducting and publishing research.	<u>Profession-Wide Competencies</u>
	<ul style="list-style-type: none"> <li>• Ethical and Legal Standards</li> </ul>
	<u>Program-Specific Competencies</u>
	<ul style="list-style-type: none"> <li>• Integration of medical health, mental health and behavior</li> </ul>

**How Knowledge is Acquired and Assessed, and the Minimum Level of Achievement Required for Graduation**

Discipline-Specific Knowledge Domain	Where Acquired	Assessments	Minimum Level of Achievement for Graduation
<b>History and Systems of Psychology</b>	<ul style="list-style-type: none"> <li>• PY 704 Social Psychology</li> <li>• PY 707 Brain and Cognition</li> <li>• PY 708 Developmental Psychology</li> <li>• PY 717 Applied Statistical Methods</li> <li>• PY 740 Adult Personality and Psychopathology</li> <li>• PY 770 Survey of Psychotherapeutic Methods</li> </ul>	In PY 704, 708, 716 and 740 the student must answer an essay or short-answer test question that relates to origins and development of major ideas related to the course topic. In PY 707 and 770 the student must include this material in their in-class presentation or term paper.	Performance at the level of an A or B on relevant questions or presentation/term paper sections.
<b>Affective Aspects of Behavior</b>	<ul style="list-style-type: none"> <li>• PY 704 Social Psychology</li> <li>• PY 708 Developmental Psychology</li> <li>• <i>Either PY 720 or PY 731:</i> <ul style="list-style-type: none"> <li>• PY 720 Human Neuropsychology</li> <li>• PY 731 Health Psychology</li> </ul> </li> <li>• PY 740 Adult Personality and Psychopathology</li> </ul>	In each course, student must answer at least one essay or short-answer test question that relates to affective aspects of behavior.	Performance at the level of an A or B on relevant questions
<b>Biological Aspects of Behavior</b>	<ul style="list-style-type: none"> <li>• PY 707: Brain and Cognition</li> </ul>	Students lead and participate in discussions of relevant readings on the cognitive and biological aspects of behavior and their integration. Each student writes and presents a proposal for a research project that investigates the neural basis of cognition.	Students must pass this course with an A or B.
<b>Cognitive Aspects of Behavior</b>			

<b>Developmental Aspects of Behavior</b>	<ul style="list-style-type: none"> <li>• PY 708 Developmental Psychology</li> </ul>	Students write two exams and a term paper, and participate in class discussion of readings and lectures.	Students must pass this course with an A or B.
<b>Social Aspects of Behavior</b>	<ul style="list-style-type: none"> <li>• PY 704 Social Psychology</li> </ul>	Students write two exams and a term paper, and participate in class discussion of readings and lectures.	Students must pass this course with an A or B.
<b>Advanced Integrative Knowledge of Basic Discipline-Specific Content Areas</b>	See <b>Biological Aspects of Behavior</b> and <b>Cognitive Aspects of Behavior</b> , above. PY 707 Brain and Cognition explicitly aims to provide basic coverage in these two domains of discipline-specific knowledge as well as integration across these areas. Most other required courses in the curriculum (e.g., PY 704, PY 708, PY 720, PY 731, PY 740, PY 770) as well as required research activities and clinical practica also integrate multiple domains of scientific content.		
<b>Research Methods</b>	<ul style="list-style-type: none"> <li>• PY 700 Foundations of Research Design</li> <li>• PY 718 Advanced Research Design</li> </ul>	Students write papers and exams as well as an individual predoctoral research grant proposal (e.g., NIH F31).	Students must pass this course with an A or B.
<b>Quantitative Methods</b>	<ul style="list-style-type: none"> <li>• PY 716 Introduction to Statistics and Measurement <ul style="list-style-type: none"> <li>◦ PY 716L Lab for Introduction to Statistics and Measurement</li> </ul> </li> <li>• PY 717 Applied Statistical Methods <ul style="list-style-type: none"> <li>◦ PY 717L Lab for Applied Statistical Methods</li> </ul> </li> <li>• PY 719 Multivariate Statistical Methods <ul style="list-style-type: none"> <li>◦ PY 719L Lab for Multivariate Statistical Methods</li> </ul> </li> </ul>	Students take exams, complete computer-based assignments, and write papers/projects that involve choosing, implementing and interpreting statistical analyses.	Students must pass these courses with an A or B.
<b>Psychometrics</b>	<ul style="list-style-type: none"> <li>• PY 764 Cognitive Assessment: Child and Adult. Although PY 764 is the primary vehicle for this domain, related material is introduced or reinforced in other required courses including PY 716 Intro to Statistics and Measurement, PY 717 Applied Statistical Analysis, PY 700 Foundations of Research Design, PY 718 Advanced Research Design; PY 719 Multivariate Statistics, PY 760 Interviewing and Behavioral Observation, and PY 765 Psychological Assessment of Personality.</li> </ul>	Topics in PY 764 are assessed via short-answer and essay questions on exams. Students are also required to integrate and demonstrate their knowledge of psychometric concepts in interpreting test results.	Students must pass these courses with an A or B.



How Competencies are Acquired and Assessed, and the Minimum Levels of Achievement Required for Graduation			
Competency Domain	Where Acquired	Assessment	Minimum Level of Achievement for Graduation *Specific practicum competencies are tabled separately, below.
<b>Profession-Wide Competencies</b>			
<b>Research</b>	<ul style="list-style-type: none"> <li>Foundational graduate-level research activity, including the master's thesis</li> <li>Design, execution and completion of the doctoral dissertation</li> </ul>	<ul style="list-style-type: none"> <li>Research productivity</li> <li>Research mentor ratings of competency to plan a program of research, design and conduct research studies, communicate research results, and master and apply relevant knowledge to the research process</li> <li>Doctoral dissertation proposal and completed dissertation</li> </ul>	<ul style="list-style-type: none"> <li>Submission of at least one 1<sup>st</sup>- or 2<sup>nd</sup>-author publication prior to applying for internship</li> <li>Ratings by research mentors as "substantially independent" in all major research domains</li> <li>Successful completion of a master's thesis proposal and completed thesis</li> <li>Successful completion of doctoral dissertation proposal and completed dissertation</li> </ul>
<b>Ethical and Legal Standards</b>	<ul style="list-style-type: none"> <li>PY 701 Professional Issues and Ethics</li> <li>GRD 717 Principles of Scientific Integrity</li> <li>Clinical practica</li> </ul>	<ul style="list-style-type: none"> <li>In PY 701 students participate in class discussions and write a take-home exam</li> <li>In GRD 717 students take quizzes dealing with topics such as research misconduct, mentoring, collaborative research, plagiarism, authorship, peer review, conflict of interest and protection of human research participants</li> <li>In clinical practica supervisors evaluate students for their ability to recognize and practice ethical behavior.</li> </ul>	<ul style="list-style-type: none"> <li>Students must pass PY 701 and GRD 717 with an A or B.</li> <li>Students must be rated as ready or nearly ready for internship on practicum competencies* relevant to ethical and legal standards.</li> </ul>
<b>Individual and Cultural Diversity</b>	<ul style="list-style-type: none"> <li>PY 704 Social Psychology</li> <li>PY 708 Developmental Psychology</li> <li>PY 740 Adult Personality and Psychopathology</li> <li>PY 765 Psychological Assessment: Personality</li> <li>PY 779 Foundations of Clinical Supervision and Consultation</li> <li>Two 1-hour Diversity Seminars for beginning 2<sup>nd</sup>-year students</li> <li>Clinical practica</li> </ul>	<ul style="list-style-type: none"> <li>In PY 704, PY 708, PY 740 and PY 779 students write exams and papers that relate to individual and cultural diversity.</li> <li>In PY 765 students interpret psychodiagnostic and personality test results orally and in writing.</li> <li>In the Diversity Seminars students discuss papers that they have read in advance</li> <li>In clinical practica, supervisors evaluate students for their sensitivity to diversity issues in assessment, treatment, and supervision, and as they relate to professional ethics.</li> </ul>	<ul style="list-style-type: none"> <li>Performance at the level of an A or B on relevant questions or presentation/term paper sections in PY 704, 708, 740 and 779.</li> <li>Students must pass PY 765 with an A or B.</li> <li>Students must complete and actively participate in the Diversity Seminars</li> <li>Students must be rated as ready or nearly ready for internship on practicum competencies* relevant to individual and cultural diversity.</li> </ul>

<b>Professional Values, Attitudes, and Behaviors</b>	<ul style="list-style-type: none"> <li>• PY 701 Professional Issues and Ethics</li> <li>• Clinical practica</li> <li>• Colloquium and other didactic training settings</li> <li>• Interactions with student's Graduate Advisory, Master's Thesis, and Dissertation Committees</li> </ul>	<ul style="list-style-type: none"> <li>• In PY 701, students write a final exam that includes questions related to professional values, attitudes and behavior.</li> <li>• In clinical practica, supervisors evaluate students on their professional values, attitudes and behavior.</li> <li>• Conference and colloquia attendance</li> <li>• Professional and community service</li> </ul>	<ul style="list-style-type: none"> <li>• Students must pass PY 701 with an A or B.</li> <li>• Students must be rated as ready or nearly ready for internship on practicum competencies* relevant to professional values, attitudes and behavior.</li> <li>• Students' conference and colloquium attendance, and their professional and community service, is reviewed annually by their Graduate Advisory Committees.</li> </ul>
<b>Communication and Interpersonal Skills</b>	<ul style="list-style-type: none"> <li>• PY 760 Interviewing and Behavioral Observation</li> <li>• PY 764 Cognitive Assessment: Child and Adult</li> <li>• PY 765 Psychological Assessment: Personality</li> <li>• Clinical practica</li> </ul>	<ul style="list-style-type: none"> <li>• In PY 760 students are evaluated for their clinical communication and interpersonal skills in role-plays and a clinical interview with a mock patient</li> <li>• In PY 764 students write clinical reports based on intellectual and achievement test results.</li> <li>• In PY 765 students interpret test results orally and in writing.</li> <li>• In clinical practica, students are evaluated for their professional communication and interpersonal skills as manifest with patients, caregivers, supervisors, and other professionals.</li> </ul>	<ul style="list-style-type: none"> <li>• Students must pass PY 760, PY 764 and PY 765 with an A or B.</li> <li>• Students must be rated as ready or nearly ready for internship on practicum competencies* relevant to their communication and interpersonal skills.</li> </ul>
<b>Assessment</b>	<ul style="list-style-type: none"> <li>• PY 760 Interviewing and Behavioral Observation</li> <li>• PY 764 Cognitive Assessment: Child and Adult</li> <li>• PY 765 Psychological Assessment: Personality</li> <li>• Clinical practica</li> </ul>	<ul style="list-style-type: none"> <li>• In PY 760 students are evaluated for their ability to conduct structured and unstructured clinical interviews at an introductory level.</li> <li>• In PY 764 students administer and interpret intellectual and achievement tests.</li> <li>• In PY 765 students interpret personality and psychdiagnostic test results orally and in writing.</li> <li>• In clinical practica, students are evaluated for their competence in selecting, administering and interpreting cognitive, psychodiagnostic and neuropsychological tests, and their ability to integrate test results with history and interview findings.</li> </ul>	<ul style="list-style-type: none"> <li>• Students must pass PY 760, PY 764 and PY 765 with an A or B.</li> <li>• Students must be rated as ready or nearly ready for internship on assessment-related practicum competencies*.</li> </ul>
<b>Intervention</b>	<ul style="list-style-type: none"> <li>• PY 770 Survey of Psychotherapeutic Methods</li> <li>• PY 769 Cognitive Behavior Therapy</li> <li>• Clinical practica</li> </ul>	<ul style="list-style-type: none"> <li>• In PY 770 students give an in-class presentation, write a term paper and participate in class discussions related to a wide range of psychotherapeutic methods and approaches.</li> <li>• In PY 769 students write exams, case conceptualizations and treatment plans, and give an oral presentation, on use of CBT for a range of psychological and behavioral disorders for which its efficacy is established.</li> <li>• In clinical practica, students are evaluated for their ability to conceptualize problems, create treatment plans, and implement and document empirically-supported treatments.</li> </ul>	<ul style="list-style-type: none"> <li>• Students must pass PY 770 and PY 769 with an A or B.</li> <li>• Students must be rated as ready or nearly ready for internship on intervention-related practicum competencies*.</li> </ul>

<b>Supervision</b>	<ul style="list-style-type: none"> <li>• PY 779 Fundamentals of Clinical Psychology Supervision and Consultation</li> <li>• Clinical practica</li> </ul>	<ul style="list-style-type: none"> <li>• In PY 779 students read and discuss papers, chapters and guidelines relating to professional supervision in diverse contexts.</li> <li>• In clinical practica, students are evaluated for their knowledge and skill in the area of clinical supervision.</li> </ul>	<ul style="list-style-type: none"> <li>• Students must pass PY 779 with an A or B.</li> <li>• Students must be rated as ready or nearly ready for internship on supervision-related practicum competencies*.</li> </ul>
<b>Consultation and Interprofessional / Interdisciplinary Skills</b>	<ul style="list-style-type: none"> <li>• PY 779 Fundamentals of Clinical Psychology Supervision and Consultation</li> <li>• Clinical practica</li> </ul>	<ul style="list-style-type: none"> <li>• In PY 779 students read and discuss papers and expert panel reports relating to the role of psychologists in interprofessional and interdisciplinary contexts.</li> <li>• In clinical practica, students are evaluated for their knowledge and skill in interprofessional / interdisciplinary consultation.</li> </ul>	<ul style="list-style-type: none"> <li>• Students must pass PY 779 with an A or B.</li> <li>• Students must be rated as ready or nearly ready for internship on practicum competencies* related to this domain.</li> </ul>
<b>Program-Specific Competency</b>			
<b>Integration of medical health, mental health and behavior</b>	<ul style="list-style-type: none"> <li>• <i>Either PY 720 or PY 731:</i> <ul style="list-style-type: none"> <li>• PY 720 Human Neuropsychology</li> <li>• PY 731 Health Psychology</li> </ul> </li> <li>• Clinical practica</li> <li>• A predoctoral internship that integrates medical and mental / behavioral health care.</li> </ul>	<ul style="list-style-type: none"> <li>• In PY 720 students write three exams, give two presentations, and contribute to class discussion.</li> <li>• In PY 731 students evaluate health outcome measures, design a behavior change guide for patients with chronic illnesses, write a research proposal and actively participate in class discussions of assigned chapters and articles.</li> <li>• In clinical practica, students are evaluated for their attention to medical/pharmacological issues in assessment and</li> <li>• Feedback from internship sites is used to assess this competency.</li> </ul>	<ul style="list-style-type: none"> <li>• Students must pass PY 720 or PY 731 with an A or B.</li> <li>• Students must be rated as ready or nearly ready for internship on practicum competencies* related to this domain.</li> <li>• Students must successfully pass their integrative clinical internship.</li> </ul>
<b>*Clinical Practicum Competencies by Domain</b> <b>Numbers refer to items on our Clinical Practicum Evaluation Form</b>			
<b>Ethical and Legal Standards</b>	2a.2 Maintains appropriate boundaries: Supervisor observes appropriate boundaries with all of the student's patient/clients 2a.3 Makes ethical decisions regarding clinical relationships: Supervisor observes no marginal or unsatisfactory ethical decision-making in clinical relationships or services 3b.1 Expresses knowledge of and concern for ethical issues in professional practice, and acts accordingly 3b.2 Expresses knowledge of and concern for ethical issues in aspects of professional practice that are related to cultural or individual diversity, and acts accordingly 3c.1 As a supervisor in training, articulates and acts on the basis of their ethical responsibilities to patients/clients, supervisees, and their supervisor 3c.3 Keeps adequate records of supervision as a basis for effective communication with supervisees regarding their progress, training needs and concerns		
<b>Individual and Cultural Diversity</b>	2c.5 Is sensitive to diversity issues, including patient and community values and preferences for care, and is able to address them effectively during assessment or therapy 3b.2 Expresses knowledge of and concern for ethical issues in aspects of professional practice that are related to cultural or individual diversity, and acts accordingly 3c.2 Demonstrates respect for diversity in behavior towards supervisees		

<b>Professional Values, Attitudes, and Behaviors</b>	1c.1 Understands the value and role of science in the practice of clinical psychology 1c.2 Understands the value and role of clinical practice in science 3a.1 Engages appropriately in supervision. Is open to constructive feedback on all professional activities and to questions regarding their own professional behavior. 3a.2 Engages in appropriate (respectful and collaborative) verbal interaction with other professionals/staff 3a.3 Communicates appropriately in writing with other professionals/staff: Notes on assessment and treatment results are timely, relatively brief, well-organized, and based on sound observation 3a.4 Attends all scheduled activities and provides timely notice if they cannot attend for a legitimate reason 3a.5 Changes their behavior as a function of supervisor's feedback 3a.6 Demonstrates motivation and interest in the profession; e.g., by reading relevant journal articles, attending conferences and workshops, and engaging in discussion of important professional matters 3a.10 Unimpeded by behavioral problems that hinder delivery of professional services or ability to benefit from supervision 3b.3 Takes advantage of local, national and/or international educational and training opportunities to increase knowledge and competence
<b>Communication and Interpersonal Skills</b>	2a.1 Establishes strong positive therapeutic alliances: Supervisor observes satisfactory or better therapeutic alliance with all of the student's patient/clients 3a.2 Engages in appropriate (respectful and collaborative) verbal interaction with other professionals/staff 3a.3 Communicates appropriately in writing with other professionals/staff: Notes on assessment and treatment results are timely, relatively brief, well-organized, and based on sound observation
<b>Assessment</b>	1a.1 Knowledge of the DSM and its proper usage 1a.2 Knowledge of appropriate administration and interpretation of assessment instruments 1a.3 Knowledge of theories and evidence regarding assessment interview formats 1a.4 Understanding of common medical and pharmacologic issues relevant to assessment 2b.1 Chooses assessment instruments that are appropriate to case needs. Supervisor observes student making satisfactory choices for instruments for many cases. 2b.2 Interprets testing and express results clearly. Supervisor observes student scoring tests correctly, interpreting test results appropriately, and writing satisfactory integrated reports. 2b.3 Able to use psychological interview for assessment 2b.4 Draws valid inferences from interviews 2b.5 Conceptualizes cases credibly (adequately) in supervision meetings 2b.6 Conceptualizes cases credibly (adequately) in written reports 2b.7 Makes appropriate DSM diagnoses. Supervisor observes agreement with student on at least 75% of major diagnostic categories.
<b>Intervention</b>	1b.1 Knowledge of theoretical orientations and their use in guiding treatment 1b.2 Understands the appropriate use of therapeutic approaches 1b.3 Recognizes the impact of cultural and individual differences upon the therapeutic process 1b.4 Understands both the value of ESTs and the value of individualizing therapy 2c.1 Uses case conceptualization to draw appropriate implications for an ideal treatment plan 2c.2 Uses case conceptualization to draw appropriate implications for a treatment plan that appropriately considers idiosyncrasies of the patient/client's individual situation 2c.3 Implements individual treatments effectively based on a developed treatment plan 2c.4 Implements group therapy effectively, working supportively of a co-therapist if present

<b>Supervision</b>	<p>1d.1 Articulates an approach to supervision that is grounded in research</p> <p>1d.2 Provides supervisees with feedback that is based in substantive knowledge of the area being supervised</p> <p>2d.1 Establishes strong positive supervisory relationships/alliances with supervisees and other trainees to whom they are charged with providing feedback</p> <p>2d.2 Promotes supervisee's self-assessment and development by maintaining an appropriate balance between support and challenge/critique</p> <p>2d.3 Encourages and uses evaluative feedback from supervisees</p> <p>3c.1 As a supervisor in training, articulates and acts on the basis of their ethical responsibilities to patients/clients, supervisees, and their supervisor</p> <p>3c.2 Demonstrates respect for diversity in behavior towards supervisees</p> <p>3c.3 Keeps adequate records of supervision as a basis for effective communication with supervisees regarding their progress, training needs and concerns</p>
<b>Consultation and Interprofessional / Interdisciplinary Skills</b>	<p>3a.2 Engages in appropriate (respectful and collaborative) verbal interaction with other professionals/staff</p> <p>3a.3 Communicates appropriately in writing with other professionals/staff: Notes on assessment and treatment results are timely, relatively brief, well-organized, and based on sound observation</p> <p>3a.7 Understands and respects the unique cultures, values, perspectives, roles/responsibilities, and expertise of other health professions</p> <p>3a.8 Integrates the knowledge and experience of other professions to inform care decisions</p> <p>3a.9 As a team member listens actively, encourages ideas and opinions of others, and expresses knowledge and opinions with confidence, clarity, and respect</p>
<b>Integration of medical health, mental health and behavior</b>	<p>1a.4 Understands common medical and pharmacologic issues relevant to assessment</p> <p>3a.8 Integrates the knowledge and experience of other professions to inform care decisions</p>

## **Appendix F: Learning Outcomes, Measures and Targets for Institutional Accreditation**

- These program-level metrics are assessed against associated targets on an annual basis as part of the program's continuous quality improvement efforts. All UAB academic programs have a similar process with their own metrics and targets, as required for the institution's accreditation by the Southern Association of Colleges and Schools.
- Beginning in Spring 2020, all metrics with associated targets will be included in the annual report that each student submits as part of the annual review of progress and plans. The goal is to ensure awareness of these targets among students and their Graduate Advisory Committees, and to facilitate data collection for program-level assessment.
- Suggestions for additional targets and metrics are welcome.

### **LEARNING OUTCOME 1: Engagement in Scientific and Professional Research Organizations**

Students working toward their degrees will demonstrate appreciation of the value of participation in scientific and professional conferences as a basis for continuing to engage in empirically-supported professional practice, maintaining their professional engagement, and sharing their research findings.

#### **MEASURE 1: Membership in Scientific and Professional Organizations**

Students will demonstrate appreciation for the value of participation in scientific and professional conferences by maintaining memberships in national and/or international scientific and professional organizations.

##### **Targets and Data Sources:**

- a. By December of program Year 2, 80% of all students will have joined a professional or scientific organization.
- b. By December of program Year 3, 100% of all students will have joined a professional or scientific organization.

Data obtained from CVs collected at the end of each calendar year.

#### **MEASURE 2: Conference Attendance**

Students will demonstrate appreciation for the value of participation in scientific and professional conferences by attending national and/or international scientific and professional conferences.

##### **Targets and Data Sources:**

- a. By April of program Year 2, 50% of all students will have attended a meeting of a professional or scientific organization.
- b. By April of program Year 3, 100% of all students will have attended a meeting of a professional or scientific organization.

Data to be obtained from annual progress reports obtained at the end of each spring term.

#### **MEASURE 3: Conference Presentations**

Students will demonstrate appreciation for the value of participating in scientific and professional conferences, as well as the requisite skills associated with submitting, creating and

delivering scientific presentations, by presenting papers at national and/or international conferences.

**Targets and Data Sources:**

- a. By December of program Year 2, 60% of all students will have authored or co-authored a conference presentation based on UAB graduate work.
  - b. By December of program Year 3, 80% of all students will have authored or co-authored a conference presentation based on UAB graduate work.
  - c. By December of their graduation year, 100% of students will have authored or co-authored at least five conference presentations based on UAB graduate work.
  - d. By December of their graduation year, 100% of students will have first-authored and presented at least two conference presentation based on UAB graduate work.
- Data from CVs collected at the end of each calendar year.

**LEARNING OUTCOME 2: Publication in Scientific Journals**

Students working toward and completing their degrees will demonstrate their knowledge of behavioral science and their skills in scientific research by publishing papers in peer-reviewed scientific journals.

**MEASURE 4: Publications**

**Targets and Data Sources:**

- a. By December of program Year 3, 50% of all students will have authored or co-authored a peer-reviewed publication based on UAB graduate work.
  - b. By program completion, 100% of students will have been first or second author on a peer-reviewed publication based on UAB graduate work.
- Data obtained from CVs collected at the end of each calendar year.

**LEARNING OUTCOME 3: Research Performance, Conduct, and Progress**

Students working toward their degrees will demonstrate knowledge and skills required for research, develop and demonstrate knowledge of the responsible and ethical conduct of research, and make steady progress toward completion of research requirements.

**MEASURE 5: Positive evaluations by research mentors**

Students will receive positive evaluations of their knowledge and skills from their research mentors at the end of each academic term

**Target and Data Sources:**

At least 95% of students in residence will have received consistently positive evaluations from research mentors during the current academic year.  
Evidence will be data from evaluations submitted by mentors at the end of each academic term (i.e., 3x/year).

**MEASURE 6: Regulatory compliance and responsible conduct of research**

Students will demonstrate understanding of regulatory requirements and best practices for responsible conduct of research by their compliance with all university and federal requirements regarding human or animal research and by their performance in relevant graduate-level coursework.

**Targets and Data Sources:**

- a. 100% of students will document compliance with UAB Institutional Review Board and Graduate School requirements for ethical conduct of research.
- b. 100% of students will pass a graduate-level course in responsible conduct of research before admission to candidacy for the doctorate.

Evidence will be data from documentation submitted as part of the application for admission to candidacy for the master's and doctorate degrees, and by transcripts.

**MEASURE 7: Progress toward program completion**

Students will understand and satisfy program expectations for consistent and steady progress toward completion of the doctorate

**Targets and Data Sources:**

- a. 80% of students in residence will be making recommended or good progress, consistent with completion of the pre-doctoral internship and graduation within 6 years of entry into the program.
- b. Students will demonstrate their ability to evaluate their progress against program benchmarks and communicate that information to their advisory committees along with plans to address problems with progress to date.
- c. 100% of program graduates will be within 7 years of entry into the program at the time of graduation. Students with documented eligibility for accommodations under the Americans with Disabilities Act are not included in this assessment.

Evidence will be data from annual reports and individual development plans submitted at the end of the Spring semester each year.

**LEARNING OUTCOME 4: Acquisition of clinical experience, knowledge, skills, and professionalism**

In clinical practica, students will acquire experience, knowledge, skills, professional attitudes and behaviors that are consistent with timely preparation for the pre-doctoral clinical internship.

**MEASURE 8: Acquisition of program-approved and supervised clinical experience**

Students will demonstrate appreciation for the importance of clinical training, advising and internship requirements by steadily acquiring clinical experience under the guidance of their advisory committees, by maintaining up-to-date approvals of all clinical practica and by tracking their clinical hours and experiences, including supervision experiences, on an ongoing basis.

**Targets and Data Sources:**

- a. 70% of students will have accrued at least 75 hours of supervised intervention and assessment experience for each term that they have been engaged in practicum training (i.e., all terms of enrollment beginning with Year 2).
- b. 100% of students will have accrued at least 60 hours of supervised intervention and assessment experience for each term that they have been engaged in practicum training (i.e., all terms of enrollment beginning with Year 2).
- c. 100% of students will have accrued at least 15 minutes of group or individual supervision for each hour of direct patient contact.
- d. 70% of students in Year 2 or later will submit clinical practicum agreements with an average delay of no more than two weeks after beginning each practicum experience, and the average delay across all submissions will be two weeks or less.



Evidence for Targets 1-3 will be hour tracking reports submitted through our practicum tracking website and/or annual reports of accumulated clinical experiences submitted at the end of each Spring term through the annual report and individual development plan process. Evidence for Target 4 will be average per-student and program-wide delays from practicum start date to submission date.

#### **MEASURE 9: Acquisition of clinical knowledge, skills, professional attitudes and behaviors**

Students will acquire and demonstrate increasing levels and breadth of knowledge and skills, as well as increasing professional attitudes and behaviors, in the context of clinical practicum experiences. Competencies will reach levels consistent with readiness for clinical internships by the end of the fall semester of the 5<sup>th</sup> program year. Evidence will be data from clinical practicum rating forms completed by clinical supervisors.

##### **Targets and Data Sources:**

- a. 90% of students will receive supervisor ratings of clinical knowledge that are consistent with their year of clinical training.
  - b. 90% of students will receive average supervisor ratings of clinical skills that are consistent with their year of clinical training.
  - c. 90% of students will receive average supervisor ratings of professional attitudes and behaviors that are consistent with their year of clinical training.
  - d. 100% of students will have completed practica that include training and assessment of at least 40 of 43 program-identified competencies by the time they leave for internship.
- Evidence will be average clinical practicum ratings in each domain (knowledge, skills, attitudes/behaviors) submitted during the fall and spring terms. Criteria will be >1 for 1<sup>st</sup>-year students, >2 for 2<sup>nd</sup> year students, etc.